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COUNTY BOROUGH OF HASTINGS.

PUBLIC HEALTH DEPARTMENT

INCLUDING

SCHOOL MEDICAL SERVICE.

ANNUAL REPORT FOR 1934.

G. R. BRUCE, O.B.E., M.A., M.D., D.P.H.,
Medical Officer of Health
and
School Medical Officer.

ST. LEONARDS-ON-SEA :
PRINTED BY A. H. BUTLER, LTD., 34-35 Western Road.



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PREFACE.

Health Department,
44, Wellington Square,
Hastings,

April, 1935.

TO HIS WORSHIP THE MAYOR, AND TO THE ALDERMEN AND
COUNCILLORS OF THE COUNTY BOROUGH OF HASTINGS.

MR. MAYOR, LADIES AND GENTLEMEN,

I have the honour to submit herewith the Annual Report of the Health Department for 1934, this being an ordinary, as compared with a five yearly survey report.

The vital statistics for 1934 were generally favourable. The death-rate, corrected for the age and sex constitution of the population, estimated mid-year at 63,750, was 10·58 per 1,000, compared with 11·60 in 1933; the figure for England and Wales, in 1934, being 11·8 per 1,000.

The birth-rate for the first time in 10 years showed a substantial increase from 713 in 1933 to 805, the rate per 1,000 being 12·6. It should, however, be realised that the birth-rate in Hastings is now definitely below the crude death-rate, the deaths in 1931 numbering 1,008, so that in the absence of new residents our population must inevitably fall.

The infant mortality rate, 36 per 1,000 births, was the second lowest recorded for the Borough, while the maternal mortality rate fell from 6·8 to 3·6 per 1,000 births. The mortality from tuberculosis, 75 per 1,000, was just slightly over

the low figure for 1933, '67 per 1,000. The incidence and mortality from infectious disease, both notifiable and non-notifiable, were light.

The various activities of the Health Department in relation to the prevention and treatment of Infectious Diseases, General Sanitary Administration, Tuberculosis, Maternity and Child Welfare, the School Medical Service, Venereal Diseases, Mental Deficiency, etc., were fully maintained, the year's record being set out in the appropriate chapter of the report.

The work necessary in connection with the preparation of schemes for slum clearance under the five years' plan of campaign of the Ministry of Health occupied a great deal of attention. The Ministry of Health conducted a public enquiry in June in relation to the first section, which dealt mainly with the valley of the Bourne through the Old Town. As a result this will practically be cleared and the occupants rehoused either in the Old Town or in three sites, namely, at Bembrook Farm, West Hill, Hollington and Ore. The second section of the scheme is under consideration.

During the year, Mr. H. F. Veness, Sanitary Inspector, Eastern half of the Borough, retired after 35 years of most devoted, useful and efficient service to the Corporation. Mr. E. W. Jones, Sanitary Inspector, Western half of the Borough, was appointed as Chief Sanitary Inspector for the Borough.

I have to thank the Council, Chairmen and Members of various Committees for their renewed support, and I again acknowledge with gratitude the good work and loyalty of my staff.

I have the honour to remain,
Mr. Mayor, Ladies and Gentlemen,
Your obedient Servant,
G. R. BRUCE.

Public Assistance Committee and Sub-Committees—COUNCILLOR P. K. LE MAY.

NAME OF OFFICERS.	OFFICES HELD.
*G. R. BRUCE, O.B.E., M.A., M.D., D.P.H.	Medical Officer of Health; School Medical Officer; Tuberculosis Officer; Superintendent Medical Officer, Borough Sanatorium.
*H. J. PHILLIPS, M.D., CH.B., B.SC., D.P.H.	Deputy Medical Officer of Health; Deputy School Medical Officer; etc., etc.
L. H. BOOTH, M.B., CH.B.	Medical Officer, Hastings Municipal Hospital; Public Vaccinator; Medical Officer (Out Relief), Public Assistance Committee.
*P. LAZARUS-BARLOW, M.D. (CANTAB.)	Bacteriologist; Medical Officer, Venereal Diseases Clinic.
F. J. CUTLER, M.R.C.S., L.R.C.P. ...	Medical Officer, (Out Relief), Public Assistance Committee; Public Vaccinator.
T. REED, M.R.C.S., ENG., L.R.C.P., LOND.	Public Vaccinator; Medical Officer, (Out Relief), Public Assistance Committee.
D. RICHARDSON, F.S.A.	Public Vaccinator; Medical Officer, (Out Relief), Public Assistance Committee.
*J. S. FARNFIELD, M.R.C.S. ENG., L.R.C.P. LOND.	Medical Officer, Maternity and Child Welfare Clinic.
*H. STANLEY, M.B., BCH. CANTAB., M.R.C.S., L.R.C.P.	do. do.
*G. A. TICHEST, M.A., CH.B., B.C., M.R.C.S., L.R.C.P.	Medical Officer, Maternity and Child Welfare and Ante-Natal Clinic; Consultant under the Puerperal Fever and Puerperal Pyrexia Regulations.
*J. WALLER, L.R.C.P. EDIN., L.R.C.S. EDIN.	Medical Officer, Ante-Natal Clinic.

Public Health Officers of the Corporation.

(Continued.)

NAME OF OFFICERS.	OFFICES HELD.
*G. H. HOWE, M.B., CH.B. EDIN. ...	Consultant under the Puerperal Fever and Puerperal Pyrexia Regulations.
N. GRELLIER, M.R.C.S., L.R.C.P., D.M.R.E. (CAMB.) ...	Consulting Radiologist, Hastings Municipal Hospital.
*W. D. PENFOLD, L.D.S., R.C.S.ENG.	School Dental Officer.
G. M. NORMAN, F.I.C., A.R.C.S., F.C.S.	Borough Analyst; Official Agricultural Analyst.
P. PERKINS, M.R.C.V.S. ...	Veterinary Inspector.
E. W. JONES, (c) (d) ...	Sanitary Inspectors; also Inspectors under Shops Acts, Food and Drugs (Adulteration) Act, Housing Acts, Rats and Mice (Destruction) Act, etc.
H. F. VENESS, (e) (d) (f) ...	
G. F. SMART (c) (d) ...	Assistant Sanitary Inspector;
E. H. EVANS (c) (d) ...	Inspector under Shops Acts.
F. R. ALLERTON, (c) (d) ...	do. do.
*Miss S. A. MYERS, (f) (g) ...	do. do.
*Miss T. HARRIS, (c) (f) (g) (h) ...	Health Visitor and School Nurse;
*Mrs. A. ESHELBY, (f) ...	Inspector of Midwives.
*Miss G. W. HICKSON, (c) (f) (g) (h) ...	Health Visitor, and School Nurse.
*Miss W. M. HEATON, (b) (f) (g) (h) ...	School Nurse.
*Miss A. PARKHOUSE, (f) ...	Health Visitor and School Nurse.
Miss F. POLLARD, (f) (i) ...	Health Visitor and School Nurse.
*C. L. WHEATLEY ...	Health Visitor, Tuberculosis.
C. O. PERRING ...	Matron, Borough Sanatorium.
*Miss H. E. CHESHIRE ...	Chief Clerk.
H. R. H. ASHLEY ...	Vaccination Officer.
K. N. KIRBY ...	Clerk, Maternity and Child Welfare.
R. FREEMAN ...	Tuberculosis.
*Miss G. M. BARKER ...	Clerk, Sanitary Inspector's Office.
*Miss D. G. COOTE ...	Clerk, General Office.
*Miss K. A. TROW (a) ...	Junior Clerk, General Office.
*Miss E. BRYANT, (b) ...	Senior Clerk, School Medical Service.
*Miss D. GRAY ...	Clerk, do. do.
	Clerk, do. do.
	Clerk, School Medical Service.
	Clerk, School Dental Officer.

*Salary contribution under Public Health Acts or by Exchequer Grants.

- (a) Resigned.
- (b) Commenced duties 12th June, 1933.
- (c) Certificate, Royal Sanitary Institute. Inspector of Nuisances.
- (d) do. do. Inspector of Meat and other Foods.
- (e) do. Royal Institute of Public Health, Inspector of Nuisances.
- (f) Fully trained General Nurse.
- (g) Certificate of Central Midwives Board. (C.M.B.)
- (h) Certificate, Maternity and Child Welfare Worker.
- (i) Certificate, Fever Training.
- (j) Certificate of the Royal Sanitary Institute and Sanitary Inspectors Examination Joint Board.
- (k) Health Visitor's Certificate.
- (l) Retired, 3rd November, 1934.

SUMMARY OF GENERAL AND VITAL STATISTICS, 1934.

Area of Borough	4,496 acres.
Population, Census 1931	65,207
Registrar-General's estimate of resident population, 1934, for the purpose of Vital Statistics	63,750
Number of inhabited houses (end of 1934) according to Rate Books	18,237
Rateable Value	£715,245
Sum represented by a penny rate	£2,846

	Total.	Male.	Female.	
Live Births, 1934 { Legitimate	748	398	350	} = 805
{ Illegitimate	57	25	32	

Birth Rate, 1934, per 1,000 of the estimated resident
population 12·6

Still Births 26

Rate per 1,000 total (live and still) births 13·03

Deaths, 1934 1,008

Death Rate, 1934, per 1,000 of the estimated resident
population (a) crude 15·8
(b) corrected 10·58

Deaths from puerperal causes :—

	Deaths.	Rate per 1,000 total (live and still) births.
No. 29—Puerperal sepsis ...	1	1·2
„ 30—Other Puerperal causes	2	2·4
	—	—
Total ...	3	3·6
	—	—

Death Rate of Infants under one year of age

(a) All infants per 1,000 live births 36

(b) Legitimate Infants per 1,000 legitimate live
births 32

(c) Illegitimate Infants per 1,000 illegitimate
live births 87·7

Deaths from Measles (all ages) 1

„ „ Whooping Cough (all ages) 1

„ „ Diarrhoea (under 2 years of age) Nil.

VITAL STATISTICS.

(1) Population.

The population at the census of 1931 was returned at 65,207. For statistical purposes the mid-year population of 1931 was estimated by the Registrar General at 63,750, an increase of 250, as compared with the estimated population for 1933. The matter of overcrowding, in relation to housing, is dealt with in the appropriate section.

(2) BIRTHS.

The net live births registered in Hastings for 1934 were 805, made up as follows:—

	Registered in Borough.	Transferred elsewhere.	Transferred Hastings.	Total.
Males ...	442	31	12	423
Females	402	28	8	382
Totals	844	59	20	805

Of the births 57, males 25, and females 32, were illegitimate, a percentage of 7·1.

In 1934, the births shewed a substantial increase, a total of 805 net births or a birth-rate of 12·6 per 1,000 as compared with a total of 713 births in 1933, or an increase of 11·4 per cent. Indeed, the figure of 805 births is higher than any recorded since 1923. At the same time it should be noted that in 1931 there was a slight increase in the birth-rate over the whole country. A further fall in the birth-rate must, however, be anticipated within the next few years, in view of the fact that the numbers of available adults of marriageable age are now reduced, as a result of the falling birth-rate during the first two decades of the century.

It should be noted also that in this Borough the total deaths now exceed the births; in 1931 by 203. The importance of bringing residents into the town to prevent the population from declining is obvious. As a matter of fact there is definite

evidence, from the Census of 1931 and general building activity in recent years, that the number of incoming residents much more than counter-balance this loss.

The comparative birth-rate, with other particulars relating to infantile mortality is shewn on Table 1, page 34.

(3) DEATHS.

The total net deaths registered in Hastings in 1934 were 1,008, of whom 425 were males, 583 females.

Not included were 177 deaths transferred to other districts ; included were 47 deaths of Hastings residents, occurring elsewhere.

Deaths in Public Institutions were 475, 122 being transferred elsewhere.

There were 44 Coroner's inquests.

The crude death-rate per 1,000 of the population is 15·8, which, corrected for the peculiar age and sex constitution of the population by the new factor, '67, gives a death-rate of 10·58 per 1,000.

(4) AGE AT DEATH.

Of the 1,008 deaths, 29 occurred in infants under one year of age, the infantile mortality being 36 per 1,000 births.

From 1-5 years of age there were 11 deaths ; from 5-25 years 22 deaths ; from 25-45 years 66 deaths ; from 45-65 years 228 deaths ; and over 65 years 652 deaths, or 65 per cent. of the total.

(5) MAIN CAUSES OF DEATH.

(a) Diseases of the Circulatory System.

The proportion of the total deaths due to diseases of the heart and arteries amounted to 43·5 per cent. of the total, or 6·8 per 1,000 of the population.

These figures approximate closely to those recorded in 1933. In recent annual reports I have commented on the increasing death rate from diseases of the circulatory system, as a result of the intensity, pressure and pace of modern life, and the fact that, with greater expectation of life, the heart and arteries must ultimately wear out.

**(1) Analysis of Deaths from Diseases
of the Circulatory System, 1934.**

Deaths from	Total.	Under 45 years.	45-65 years.	Over 65 years.
Heart Disease	299	4	49	246
Cerebral Hæmorrhage	136	—	26	110
Other Circulatory Diseases	4	—	—	4
Totals	439	4	75	360

**(2) Comparative Analyses, 1926-1934.
Deaths from Diseases of Circulatory System.**

Year.	Total Deaths, Diseases of Circulatory System.	Percentage of Total Deaths.	Death Rate Diseases of Circulatory System, per 1,000
1926	289	31·3	4·7
1927	305	31·9	4·9
1928	336	35·7	5·4
1929	343	34·3	5·4
1930	328	36·7	5·2
1931	381	38·8	6·1
1932	356	35·8	5·6
1933	435	42·4	6·9
1934	439	43·5	6·8

(b) Cancer.

The following table shows the comparative mortality since 1910.

1910—1919 —yearly average 109 deaths due to cancer.

1920—1924	do	do	123	„	„	„
1925—1929	do	do	137	„	„	„
1930			114	„	„	„
1931			135	„	„	„
1932			141	„	„	„
1933			148	„	„	„
1934			164	„	„	„

Deaths from Cancer in 1934 according to sex and organ of body affected.

Part affected.	No. of Deaths.		
	Male.	Female.	Total.
Tongue, Lips, Mouth, Throat, or Larynx	6	3	9
Gullet	6	1	7
Stomach	8	15	23
Abdomen, Bowel, etc. ...	20	45	65
Breast	—	21	21
Womb	—	12	12
Genito-Urinary	6	7	13
Miscellaneous	6	8	14
Total	52	112	164
PERCENTAGE OF TOTAL ...	34 per cent.	66 per cent.	

The table showing the comparative mortality from Cancer in this town during the past 25 years merits close study. There has been a definite, one might even say rapid rise in mortality from 109 deaths to 164, an increase of approximately 50 per cent. The figure for 1931, 168 deaths, is again the highest recorded, substantially greater than the figure for 1933, and equivalent to a death-rate of 2·7 per 1,000 of the population. Of the deaths due to cancer no less than 66 per cent. occurred in females, the preponderance being due partly to an increase of females over males in the population of approximately 20 per cent., and to the incidence of cancer in the womb and breast in women.

The national anti-cancer campaign has therefore peculiar significance in a population of the constitution of Hastings. It is encouraging, in the face of the figures quoted, to record the gift of a small quantity of radium for the Sussex branch of the British Empire Cancer Campaign Association, stored in the Royal East Hospital, for the use of patients in the districts served by the voluntary hospitals of Hastings and Eastbourne. The radium has now been used in 26 cases with considerable benefit, especially in cases of rodent ulcer (cancer of the skin) which often responds extremely well to radium.

V.S. Table No. 2. (Ministry of Health.) CAUSES OF, AND AGES AT, DEATH DURING YEAR, 1934.

CAUSES OF DEATH.		Net Deaths at the subjoined ages of Residents, whether occurring within or without the District												Total Deaths whether of 'Residents' or 'Non-Residents' in Institutions in the District.	WARD DISTRIBUTION.										
		All ages.	0 to 1 year.	1 to 2 yrs.	2 to 5 yrs.	5-15 yrs.	15-25 yrs.	25-35 yrs.	35-45 yrs.	45-55 yrs.	55-65 yrs.	65-75 yrs.	75 & upds.		All Saints.	St. Cle- ments.	St. Mary's Lower.	St. Mary's Upper.	St. Hel- en's.	Holy Trinity.	St. Mary Mag- dalen.	St. Peter's.	St. Leo- nard.	Silver- hill & Holling- ton.	
All Causes	{ Certified Uncertified	1006 2	29 ...	4 ...	7 ...	8 ...	14 ...	25 ...	41 ...	70 ...	158 ...	283 1	367 1	474 1	96 ...	75 ...	72 ...	86 ...	73 1	96 ...	102 ...	108 ...	176 1	122 ...	
Typhoid and Paratyphoid Fevers		...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	
Measles		...	1	1	...	...	...	...	...	...	...	...	...	1	...	...	...	...	...	...	...	...	...	...	
Scarlet Fever		...	1	...	...	...	1	...	...	...	...	...	...	1	1	...	...	...	...	1	...	...	...	...	
Whooping Cough		...	2	1	1	...	...	...	...	...	...	...	...	2	...	...	...	...	...	...	...	...	...	...	
Diphtheria		...	1	...	1	...	...	...	...	...	...	...	...	1	...	...	1	...	...	...	...	...	...	...	
Influenza		...	12	...	...	...	...	...	1	...	1	3	7	2	...	1	...	1	...	...	1	4	2	3	
Encephalitis Lethargica		...	...	...	...	...	...	...	...	...	...	...	...	2	...	1	...	...	...	...	...	...	...	...	
Cerebro-Spinal Fever		...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	
Tuberculosis of respiratory system		43	...	...	...	...	6	12	8	8	6	2	1	47	6	3	2	6	4	5	3	1	10	3	
Other tuberculous diseases		5	...	...	2	...	...	2	...	...	1	...	...	5	1	...	...	2	...	1	...	...	1	...	
Syphilis		2	...	...	...	...	...	...	...	1	...	...	...	1	...	...	...	1	...	...	...	...	...	...	
General paralysis of the insane, tabes dorsalis		...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	1	...	...	...	1	...	...	
Cancer, Malignant Disease		164	...	...	...	1	1	1	9	12	43	53	44	62	15	13	9	7	11	19	18	22	26	24	
Diabetes		10	...	...	...	...	...	...	...	...	2	3	5	3	...	...	...	...	...	...	...	...	...	...	
Cerebral Hæmorrhage, etc.		136	...	...	...	...	...	...	...	6	20	55	55	35	12	7	10	12	9	10	12	16	27	21	
Heart Disease		299	...	...	...	...	...	1	3	13	36	97	149	132	33	27	23	28	25	31	28	23	49	32	
Aneurysm		3	...	...	...	...	...	...	...	...	...	2	1	1	...	...	1	...	...	...	...	...	...	1	
Other circulatory diseases		1	...	...	...	...	...	...	...	...	...	1	...	...	...	...	...	1	...	...	...	...	...	...	
Bronchitis		30	...	...	...	...	...	...	...	2	4	12	12	5	4	1	2	3	3	2	2	5	4	4	
Pneumonia (all forms)		85	7	2	...	...	1	1	1	3	7	10	18	35	33	5	4	7	3	4	5	9	12	22	
Other respiratory diseases...		11	...	...	...	1	...	1	1	2	...	2	4	6	3	1	...	1	1	...	1	2	1	1	
Peptic Ulcer...		14	...	...	...	...	...	...	1	1	8	2	2	14	2	3	...	1	...	...	2	3	2	1	
Diarrhœa, etc.		3	...	1	1	...	...	...	...	...	...	1	...	2	...	...	...	1	...	1	...	...	...	...	
Appendicitis		3	...	...	...	...	...	...	...	1	1	...	1	6	...	...	...	1	...	1	...	...	1	1	
Cirrhosis of liver		4	...	...	...	...	...	...	...	3	1	...	...	2	...	...	...	1	...	1	...	1	...	...	
Other diseases of liver, etc.		...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	1	...	1	...	1	...	...	
Other digestive diseases		...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	
Acute and Chronic Nephritis		21	...	...	1	...	...	1	1	1	5	6	6	7	1	...	3	1	4	2	4	4	1	1	
Puerperal Sepsis		1	...	...	...	...	...	1	...	...	...	...	...	2	...	...	...	1	...	...	...	...	...	...	
Other puerperal causes		2	...	...	...	...	1	...	...	...	...	...	...	2	...	...	...	1	...	...	...	...	...	...	
Congenital Debility, Premature Birth, Malformations, etc.		14	14	...	...	...	...	...	1	...	...	...	...	2	...	...	...	1	1	...	...	...	...	...	
Senility		...	...	...	...	...	...	...	...	...	...	...	...	10	...	3	1	1	1	3	1	...	3	1	
Suicide		7	...	...	...	...	1	1	1	...	2	2	...	...	...	...	...	...	...	...	...	...	...	...	
Other deaths from violence		19	1	...	1	1	2	2	3	1	3	3	2	...	1	...	2	1	...	2	...	1	1	...	
Other defined diseases		114	5	...	1	4	1	2	9	12	14	22	44	18	5	1	2	2	1	...	2	...	3	3	
Causes ill-defined or unknown		...	...	...	...	...	...	...	...	...	...	...	...	75	4	11	7	11	9	14	14	18	12	...	
Totals		1008	29	4	7	8	14	25	41	70	158	284	368	475	96	75	72	86	74	96	102	108	177	122	



Finally the importance of some elementary knowledge of the symptoms and signs of the most important types of cancer, that of the breast and womb in women, the tongue and lips in men, the stomach and bowel in both sexes, etc., should be stressed. Early diagnosis leads to early and radical treatment, with prolongation of life and, in a certain proportion of cases, no recurrence. With this end in view, pamphlets dealing with various aspects of the problem are available in the health department and for distribution through various clinics by the health visitors.

(c) Respiratory Diseases (including Influenza, but excluding Pulmonary Tuberculosis).

The total deaths from bronchitis, pneumonia, influenza, etc., were 138, compared with a figure of 153 in 1933, yielding a death-rate per 1,000 of 1·9.

V.8. Table No. 1.

VITAL STATISTICS—WARDS—1934.

Ward.	Estimated Ward Population.	Births.			Birth Rate per 1,000.	Deaths	Death Rate per 1,000 crude.	Deaths under 1 year.	Infantile Mortality.
		M.	F.	Total.					
All Saints	5,628	26	25	51	9·0	96	17·0	2	39
St. Clements	5,305	102	87	189	35·6	75	14·1	6	31
St. Mary's Lower ...	5,279	22	20	42	7·9	72	13·6	1	23
St. Mary's Upper ...	6,053	35	32	67	11·0	86	14·2	1	14
St. Helen's	6,245	79	72	151	24·1	74	11·8	2	13
Holy Trinity	5,705	27	28	55	9·6	96	16·8	5	90
St. Mary Magdalen ...	6,829	15	28	43	6·2	102	14·9	4	93
St. Peter's	6,100	38	17	55	9·0	108	17·7	2	36
St. Leonards	9,473	53	44	97	10·2	177	18·6	7	72
Silverhill and Hollington	7,133	45	49	94	13·1	122	17·1	4	42
Total	63,750	442	402	844	13·2	1008	15·8	34	40
Transfers out... ..	...	31	28	59				5	
Transfers in	...	12	8	20					
Total Net	63,750	423	382	805	12·6	1008	15·8	29	36

V.S. Table No. 3.

DEATH RATES—1900-1934—HASTINGS.

	1900-1904 average	1905-1909 average	1910-1914 average	1915-1919 average	1920	1921	1922	1923	1924	1925	1926	1927	1928	1929	1930	1931	1932	1933	1934
Number of Deaths	909	848	820	914	850	852	869	821	930	879	924	954	941	993	894	981	993	1026	1008
Death Rate per 1,000 crude	14.0	13.4	13.5	17.7	14.2	14.3	14.6	13.6	15.4	14.5	15.06	15.5	15.0	15.9	14.28	15.84	15.73	16.16	15.8
*Death Rate per 1,000 corrected }	11.8	11.3	11.3	14.7	11.9	12.0	12.2	11.3	12.9	10.4	10.8	11.1	10.8	11.4	10.25	11.39	11.29	11.60	10.58

* Factor for correction 1900-1924—.84.
 1925-1933—.718.
 1934—.67.

BIRTH RATE, DEATH RATE, AND ANALYSIS OF MORTALITY DURING THE YEAR 1934.

Provisional figures for England and Wales compared with those of Hastings.

Birth rate per 1,000 Total Population.			Annual Death-Rate per 1,000 Population.										Rate per 1,000 Live Births		Percentage of Total Deaths.				
			All Causes.	Typhoid and Para- typhoid fever.	Small-pox.	Measles.	Scarlet Fever.	Whooping Cough.	Diphtheria.	Influenza.	Violence.	Diarrhoea and Enteritis under 2 Years.	Total Deaths under One Year.	Causes of Death certi- fied by Medical Practitioners	Inquest Cases.	Certified by Coroner P.M.	No Inquests	Unclassified Causes of Death.	
England and Wales	...	...	14·8	0·62	11·8	0·00	0·00	0·09	0·02	0·05	0·10	0·14	0·54	5·5	59	90·4	6·5	2·1	1·0
121 County Boroughs and Great Towns, including London	...	...	14·7	0·66	11·8	0·00	0·00	0·12	0·02	0·06	0·11	0·12	0·47	7·4	63	90·5	6·1	2·9	0·5
155 Smaller Towns (Estimated Resident Populations, 25,000 —50,000) at Census 1931	...	...	15·0	0·67	11·3	0·00	—	0·07	0·02	0·04	0·09	0·14	0·42	3·6	53	91·2	6·1	1·6	1·1
London	...	...	13·2	0·50	11·9	0·00	0·00	0·20	0·02	0·07	0·11	0·12	0·56	12·6	67	87·7	6·3	6·0	0·0
Hastings	...	...	12·6	0·4	15·8 (a) 10·58 (b)	0·00	0·00	0·01	0·01	0·03	0·01	0·19	0·29	1·24	36	91·1	4·3	4·2	0·2

(a) crude death-rate.

(b) corrected death-rate.

The maternal mortality rates for England and Wales are as follows { per 1,000 Live Births...

England	2·03	Puerperal Sepsis.	2·57	Others.	Total.
Wales	1·95		2·46		4·60
Hastings	1·2		2·4		4·41
					3·6

... Total Births

INFECTIOUS DISEASES.

(1) NOTIFIABLE INFECTIOUS DISEASES, 1934.

A complete analysis is found in Table No. 3, p. 19.

I.D. Table No. 1.

QUARTERLY INCIDENCE OF SCARLET FEVER, DIPHTHERIA AND
ENTERIC FEVER.

			Scarlet Fever.	Diphtheria	Enteric Fever.	Total.
1st Quarter	...	...	34	8	—	42
2nd Quarter	...	...	17	15	—	32
3rd Quarter	...	...	19	17	—	36
4th Quarter	...	...	9	6	—	15
Totals	...	...	79	46	—	125

Scarlet Fever.

The number of cases, 79, was below the average notified during recent years (94 per annum in the period 1930-1933). The type of disease was, on the whole, fairly mild, and the cases sporadic in character.

Of the 79 cases, 70, or 89 per cent, were admitted to the isolation hospital.

There was one return case.

Diphtheria.

The number of notified cases, 46, was slightly less than those of recent years—average of 61 in the period 1931-1933; 45 cases, or 98 per cent of the total, were removed to the isolation hospital.

The type of disease was definitely less severe than in the previous year, when there was a small outbreak of the virulent

toxic type, now recognised as diphtheria gravis. In the great majority of the cases the diagnosis was made at a comparatively early stage, so that the results, with adequate anti-toxin dosage in hospital, were correspondingly good—the mortality of 1 working out at just under 2 per cent.

In the report for 1933 emphasis was laid on the machinery for diphtheria immunisation, which was made available for school children and infants over the age of 2 years at the school clinics. As a result of the virulent outbreak already mentioned the response in the schools and districts affected was distinctly good, several hundred children being completely immunised. In 1934 the parents in several schools were circularised and invited, after full explanation, to have their children immunised against diphtheria, but the response was distinctly disappointing (see report of School Medical Service). It should be realised that the diphtheria immunisation campaign has attained a large measure of success in the U.S.A., in Canada, and already in certain large towns in this country, where severe and toxic diphtheria has for some years been prevalent. It is proposed to persist with immunisation, even in the presence of a poor response, on the same lines as hitherto, so that any parents may, on request, have their children immunised.

Enteric and Paratyphoid Fevers.

No case was notified in 1934.

Infectious Diseases of the Central Nervous System.

One fatal case of encephalitis lethargica was notified.

Small-Pox.

No case was notified, and it was not necessary to open the Small-Pox Hospital at Brede.

The vaccination return for 1933 shows a slight increase of babies vaccinated as compared with 1932, but still only about

two-fifths of the children are protected. It is true that 1934 was a year of very low prevalence of small-pox, the wave of mild small-pox having definitely receded. There is the more need for watchfulness in case of a sporadic severe case ; then the vaccinated infants would reap the appropriate benefit.

(2) NON-NOTIFIABLE INFECTIOUS DISEASES.

There was some prevalence of whooping cough and measles in the spring and early summer, but with a low mortality (1 and 2 deaths respectively). Chicken-pox and mumps were also prevalent, 124 cases of the former and 295 of the latter being reported through the School Medical Service. The mortality from influenza was light, 12 deaths, or $\cdot 19$ per 1,000 of the population.

I.D. Table No. 2. VACCINATION RETURNS FROM 1920.

Year.	Births, Central District.	Successful Primary Vaccination.	Conscien- tious Objectors.	Percentage of births vaccinated.
1920—1924 inclusive.	4,042	1,522	2,026	37.6
1925 ...	688	280	348	40.7
1926 ...	661	305	393	44.6
1927 ...	828	315	376	38.0
1928 ...	801	289	466	36.1
1929 ...	791	305	423	38.5
1930 ...	825	302	457	36.6
1931 ...	790	296	447	37.5
1932 ...	792	291	444	36.7
1933 ...	752	303	390	40.3
Totals	6,928	2,686	3,744	38.7

CASES OF INFECTIOUS DISEASES NOTIFIED DURING THE YEAR, 1934.

NOTIFIABLE DISEASES.	NUMBER OF CASES NOTIFIED.														Deaths.*	Total cases removed to Hospital.	WARD DISTRIBUTION.								Silverhill and Hollington.																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																														
	At all ages.	At ages—Years.															St. Clements.	St. Mary's Lower.	St. Mary's Upper.	St. Helen's.	Holy Trinity.	St. Mary Magdalen.	St. Peter's.	St. Leonard.																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																															
		0	1	2	3	4	5	10	15	20	35	45	65 & upwards.																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																										
Small Pox ...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...</

*For Analysis of Deaths See Table No. 2 (Ministry of Health), page 13a.

I.D. Table No. 4.**DEATHS FROM THE SEVEN CHIEF EPIDEMIC DISEASES.**

	1923	1924	1925	1926	1927	1928	1929	1930	1931	1932	1933	1934
Smallpox ...	...	...	...	...	...	...	...	...	...	...	...	...
Scarlet Fever ...	...	...	2	...	...	...	...	...	1	...	1	1
Diphtheria ...	1	...	...	1	...	2	4	4	5	6	6	1
Enteric Fever ...	...	...	1	...	1	...	1	1	...	2	1	...
Measles ...	4	...	...	8	...	3	1	12	1	1	...	1
Whooping Cough	2	3	1	5	...	4	2	1	1	1	4	2
Diarrhoea	3	1	1	6	4	2	3	2	1	1	...	3
Totals ...	10	4	5	20	5	11	11	20	9	11	12	8

(3) BOROUGH SANATORIUM FOR INFECTIOUS DISEASES.

As a result of a policy of re-conditioning and renovation, spread over a period of eleven years, the hospital is now well equipped and up-to-date in all its appointments.

In addition to diphtheria, scarlet fever and typhoid, the sanatorium is used for the convenience of the public generally, but especially of hotels, boarding houses and private schools for a considerable variety of infections, no fewer than 10 different diseases being admitted in 1934. Particular mention should be made of the admission of measles (22 cases) and erysipelas (14 cases). A considerable proportion of these cases were severe and complicated, and in these hospital treatment, for example, serum treatment in erysipelas, and general nursing were important factors in saving life and securing a satisfactory recovery.

As regards scarlet fever, a considerable proportion (89 per cent.) were admitted in spite of the fact that no obstacle was placed in the way of home isolation, provided reasonable and separate facilities for treatment were available. Scarlet fever anti-toxin

is used intramuscularly in all cases with any indication of severity, *e.g.*, temperature 100° F., septic throat or heavy rash. My impression is that, in spite of a tendency for the disease to assume a more serious form, the exhibition of anti-toxin has reduced both complications and average detention in hospital. The Dick and Schultz-Charlton tests are used as required with advantage for diagnostic purposes. During the year one return case was admitted.

In 1934 the General Nursing Council recommended that the Borough Sanatorium should be a partial instead of a full training school for nurses in view of the restricted number of cases per annum. It was decided, however, not to adopt this proposal but to increase the number of staff and assistant nurses and instead of six probationers to have two, for two years' training with local certificate. The Municipal Hospital Training School will continue to be used.

The number of fully equipped beds at the Sanatorium remains 70, at Brede Small-Pox Hospital 20, both hospitals being utilised and a number of beds reserved under agreement for the neighbouring rural and urban districts. The whole question of the scheme for isolation hospital accommodation for the County, under the Local Government Act of 1929, is at present under consideration. Should the request for accommodation exceed the necessary margin of safety, then the provision of additional accommodation, preferably a small cubicle block of 8—10 beds, must be considered.

No case of small-pox occurred in 1934. The Small-Pox Hospital has been considerably improved during the past 10 years, the main item during 1934 being the remaking of the roadway within the hospital.

(B) Cases under Treatment in 1933.**I.D. Table No. 5.**

Disease.	In Hospital Jan. 1st, 1934.	Ad- mitted. 1934.	Died 1934.	Dis- charged 1934.	In Hospital Dec. 31st, 1934.
*Scarlet Fever ...	20	112	...	129	3
Scarlet Fever and Diphtheria ...	...	2	...	2	...
*Diphtheria ...	5	64	1	66	2
Typhoid Fever... ..	...	1	...	1	..
Measles	...	22	1	21	...
German Measles	...	1	...	1	...
Whooping Cough	...	7	1	6	...
Chicken Pox	...	5	...	4	1
Mumps	...	2	...	2	...
Erysipelas	1	14	1	14	...
Totals	26	230	4	246	6

* Includes observation or negative cases.

Average Stay in Hospital, 1934.

Scarlet Fever	34 days.
Diphtheria	40 ,,
Measles... ..	24 ,,

Number of cases admitted from County Areas, 1934—49.

Complications.

Scarlet Fever :—

Nephritis,	varying degrees	...	8
Adenitis,	do. do.	...	14
Rheumatism,	do. do.	...	4
Rhinitis,	do. do.	...	13
Conjunctivitis,	do. do.	...	4
Septic fingers, toes,	do. do.	...	12
Quinsy,	do. do.	...	2

Diphtheria :—

Tracheotomy	2
--------------------	---

TUBERCULOSIS.

(1) VITAL STATISTICS.

(a) Notifications, 1934.

There was a reduction in the number of notifications in 1934, 103 as compared with 128 in 1933. Notifications of pulmonary disease fell from 98 to 82, of non-pulmonary from 30 to 21.

T. Table No. 1.

TUBERCULOSIS, 1934—NOTIFICATIONS.

Age Period.	New Cases.		Deaths.	
	Pulmonary.	Non-Pulmonary.	Pulmonary.	Non-Pulmonary.
0—1 years ...	...	...	...	...
1—5 " ...	...	7	...	2
5—10 " ...	...	3	...	...
10—15 " ...	...	1	...	...
15—20 " ...	4	1	} 6	...
20—25 " ...	7	4		...
25—35 " ...	28	4	12	2
35—45 " ...	17	...	8	...
45—55 " ...	10	...	8	...
55—65 " ...	11	...	6	1
65 upwards ...	5	1	3	...
Totals ...	82	21	43	5
Grand Totals	103		48	

T. Table No. 2.

TUBERCULOSIS, 1934—NOTIFICATIONS FROM
VARIOUS SOURCES.

Category.	Primary Notifications.	New Cases notified other Sources.	Supplemental Notifications.	Totals.
Pulmonary Males ...	30	8	...	38
" Females ...	39	5	1	45
Non-Pulmonary Males	6	1	1	8
" Females	12	2	2	16
Totals ...	87	16	4	107

T. Table No. 2a.

CASES OF TUBERCULOSIS ON THE NOTIFICATION REGISTER
ON THE 31ST DECEMBER, 1934.

TOTAL CASES.	PULMONARY.			NON-PULMONARY.		
	Males.	Females.	Total.	Males.	Females.	Total.
458	183	179	362	40	56	96

T. Table No. 3.

TUBERCULOSIS PRIMARY NOTIFICATIONS, SINCE 1922.

	1922	1923	1924	1925	1926	1927	1928	1929	1930	1931	1932	1933	1934
Pulmonary	71	81	98	94	76	65	60	82	84	141	102	91	69
Other Forms	9	22	26	39	29	19	18	14	24	23	20	26	18
Totals	80	103	124	133	105	84	78	96	108	164	122	117	87

Relation of Deaths to Notifications.

There was a considerable improvement in 1934 as regards earlier notification of tuberculosis. In 1933, the number of cases not notified before death was 12 out of 43, in 1934 the number fell to 3 cases out of 48. It is obvious that co-operation of this nature very materially assists the operation of the various measures which are comprised in the anti-tuberculosis campaign, the offer of sanatorium or hospital treatment, disinfection, examination of contacts, help through the Tuberculosis Care Committee, etc.

In view, therefore, of the importance of early notification and also, of course, because it is a statutory duty on the part of the medical practitioner, the latter is asked in each unnotified case, after death, to explain fully the circumstances.

T. Table No. 4.**RELATION OF DEATHS TO NOTIFICATIONS, 1934.**

				Pulmonary	Other Forms.	Total.
Not notified		before death		2	1	3
Notified less than 3 months		" "		6	3	9
" 3 to 6	" "	" "		6	...	6
" 6 to 12	" "	" "		7	...	7
" 1 to 2 years	" "	" "		8	1	9
" over 2	" "	" "		14	...	14
Totals				43	5	48

Death Rate from Tuberculosis.**T. Table No. 5.****DEATHS FROM TUBERCULOSIS SINCE 1905.**

Year.	No. of deaths Pulmonary Tuberculosis.	No. of deaths Other Forms of Tuberculosis.	Total Deaths.	Death Rate All Forms per 1,000.
1905-09 average	84	28	112	1·8
1910-14 "	62	23	85	1·4
1915	56	14	70	1·3
1916	69	28	97	1·9
1917	60	18	78	1·5
1918	88	17	105	2·0
1919	92	16	108	1·8
1920	66	23	89	1·5
1921	70	15	85	1·4
1922	58	19	77	1·3
1923	42	6	48	·79
1924	65	13	78	1·3
1925	71	13	84	1·4
1926	58	14	72	1·18
1927	64	7	71	1·15
1928	52	7	59	·94
1929	41	11	52	·83
1930	44	11	55	·88
1931	45	5	50	·80
1932	50	3	53	·84
1933	36	7	43	·67
1934	43	5	48	·75

The preceding table shows graphically the fall in the mortality from tuberculosis in this town—now about 40% of that prevailing at the beginning of the century.

In 1934, the mortality from pulmonary tuberculosis was '68 per 1,000, from non-pulmonary '07 per 1,000, or a total of '75 per 1,000, showing a slight increase from the remarkably low figure of '67 in 1933, but still the second lowest figure recorded.

In the report for 1933, I dealt at some length with the significance of the falling tuberculosis death-rate, and its correlation with all the measures provided by the Corporation to deal with this disease.

(2) TUBERCULOSIS HEALTH VISITOR, ETC.

(a) Home Visiting.

Home visits to new cases	...	...	84
„ „ old „	...	...	1,795
Total visits	...	...	<u>1,879</u>

(b) Articles supplied from the Health Department.

Bottles of Disinfectant	...	...	212
Sputum Mugs and Flasks	...	...	4
Thermometers	...	...	2

(3) TUBERCULOSIS DISPENSARY.

The Tuberculosis Dispensary at the Royal East Sussex Hospital deals with newly notified or suspected cases of tuberculosis sent for diagnosis and consultation and also with regard to the most appropriate line of treatment. Every opportunity has been taken to utilise, wherever necessary, the special departments of the hospital, especially X-Rays, the Pathological Laboratory, the Dental, Light Therapy and Orthopaedic Departments. In accordance with approved modern practice considerably increased use has been made of X-Rays, both for diagnosis and in the supervision of established cases.

At the Dispensary the intra-dermal Mantoux test has been used with advantage in diagnosis, the main value being the occasional negative case; the blood sedimentation test has

been used occasionally in ex-sanatorium cases, to correlate results with those obtained at the Sanatorium. Tuberculin (B.E.) has been used in a number of cases, mostly surgical tuberculosis, with considerable advantage.

During the year, 152 new cases were examined at the Dispensary, including 11 cases transferred from other areas or returned after discharge. Of 36 contacts examined, six were diagnosed as suffering from pulmonary, and two from non-pulmonary tuberculosis. The total number of attendances at the Dispensary was 960, a slight reduction as compared with 1933.

T. Table No. 6.

RETURN SHOWING THE WORK OF THE TUBERCULOSIS DISPENSARY,
DURING THE YEAR 1934.

DIAGNOSIS.	PULMONARY.				NON-PULMONARY.				TOTAL.				GRAND TOTAL	
	Adults.		Children.		Adults.		Children.		Adults.		Children.			
	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.		
A.—NEW CASES examined during the year (excluding contacts) :—														
(a) Definitely tuberculous	20	23	1	1	2	5	4	5	22	28	5	6	105	
(b) Diagnosis not completed	...	...	...	...	...	...	...	...	5	...	...	...		
(c) Non-tuberculous	...	...	...	...	...	...	...	...	14	20	3	2		
B.—CONTACTS examined during the year :—														
(a) Definitely tuberculous	2	4	...	...	...	...	...	...	2	4	...	...	36	
(b) Diagnosis not completed	...	...	...	...	...	...	...	...	1	1	...	...		
(c) Non-tuberculous	...	...	...	...	...	...	...	...	5	13	4	6		
C.—CASES written off the Dispensary Register as														
(a) Recovered	4	1	2	...	...	2	5	7	4	3	7	7	21	
(b) Non-tuberculous (including any such cases previously diagnosed and entered on the Dispensary Register as tuberculous)	...	...	...	...	...	...	...	...	23	39	8	10	80	
D.—NUMBER OF CASES ON Dispensary Register on December 31st :—														
(a) Definitely tuberculous	117	84	1	2	3	7	14	13	120	91	15	15	241	
(b) Diagnosis not completed	...	...	...	...	...	...	...	...	6	1	...	...	7	

1.	Number of cases on Dispensary Register on January 1st	...	260
2.	Number of cases transferred from other areas and cases returned after discharge under Head 3 in previous years	... ..	11
3.	Number of cases transferred to other areas, cases not desiring further assistance under the scheme, and cases "lost sight of"		41
4.	Cases written off during the year as Dead (all causes)...	...	22
5.	Number of attendances at the Dispensary (including Contacts)		960
6.	Number of Insured Persons under Domiciliary Treatment on the 31st December	... ..	21
7.	Number of consultations with medical practitioners:—		
	(a) Personal	... ..	39
	(b) Other	... ..	180
8.	Number of visits by Tuberculosis Officers to homes (including personal consultations)	... ..	65
9.	Number of visits by Nurses or Health Visitors to Homes for Dispensary purposes	... ..	968
10.	Number of		
	(a) Specimens of sputum, etc., examined...	... ..	63
	(b) X-ray examinations made in connection with Dispensary work	...	90
11.	Number of "Recovered" cases restored to Dispensary Register, and included in A(a) and A(b) above	... ..	2
12.	Number of "T.B. plus" cases on Dispensary Register on December 31st	... ..	123

T. Table No 7.

DISPENSARY ATTENDANCES FOR 1934.

(1) Insured men	...	...	...	275
women	...	...	...	203
(2) Non-insured men	...	...	...	41
women	...	...	...	227
children—				
f boys	...	...	...	81
l girls	...	...	...	57
(3) Ex-military cases	...	...	...	49
Total attendances				933

(4) INSTITUTIONAL TREATMENT, 1934.

No alteration has taken place in the arrangements for institutional treatment, as set out below.

(a) 30 beds at Darvell Hall Sanatorium for pulmonary tuberculosis.

(b) 4 beds at the Royal East Sussex Hospital for surgical tuberculosis.

(c) 21 beds at the Municipal Hospital for emergency or advanced cases.

(d) Beds as required at Chailey Heritage for Cripples, or its seaside home, Bishopstone, for cases of crippling due to tuberculosis.

The most friendly and helpful co-ordination has continued with regard to Darvell Hall Sanatorium.

T. Table No. 8.

CASES SENT TO INSTITUTIONS DURING 1934

To Darvell Hall Sanatorium	...	...	...	43
„ Royal East Sussex Hospital	...	...	...	8
„ Eversfield Chest Hospital	...	...	..	2
„ Heritage Craft Schools, Chailey	...	...	...	1
„ Preston Hall	...	...	...	2
„ Hastings Municipal Hospital	...	...	..	1
				—
Total	...	...	...	57
				—

T. Table No. 9.

RESULTS OF INSTITUTIONAL TREATMENT IN CASES DISCHARGED IN 1934.

	Quiescent.	Not Quiescent	Died in Institution.	Total.
Pulmonary :—				
T.B. —	5	3	...	8
T.B. +				
Stage 1	2	13	...	15
Stage 2	...	15	...	15
Stage 3	...	8	1	9
Non-Pulmonary :—				
Bones—Joints ...	...	2	...	2
Glands, etc. ...	...	1	...	1
Totals	7	42	1	50

The results of sanatorium treatment are shewn in Table 9. It will be noted that practically all cases are shown as still non-quiescent. In many cases, although a cure is not considered to be effected, these patients are on discharge free from any symptoms of disease, physically practically normal, in fact in many instances in better health than they have been for years, and fit to return to their employment. In most of the favourable cases artificial pneumo-thorax (the insertion of air over the pleural cavity in the affected lung) is carried out, with or without phrenic evulsion. Experience over a period of years shows that these patients are doing very well. This treatment continues at three weekly intervals for two to three years after discharge from the sanatorium, during which period many of the patients are engaged at their usual employment.

Two cases were sent to Preston Hall Village Settlement during the year.

The tuberculosis wards, now very suitable, at the Municipal Hospital, have been increasingly used, more especially for advanced and infectious cases, and from that point of view form an important element in the scheme for institutional treatment. During 1934, there were 39 admissions as Poor Law cases.

(5) THE TUBERCULOSIS CARE COMMITTEE.

The work of this Committee is closely linked up with the anti-tuberculosis services of the Corporation, supplementing them with help in certain important directions which they do not cover, viz., supplies of food, clothing, money grants to dependants during sanatorium treatment, etc.

The Care Committee has considered the question of occupational therapy, especially for adult male ex-sanatorium patients, who have had some training. It is hoped during 1935 to develop a scheme by making small grants to encourage home-work, such as basket making, leather work, making of model ships, etc. The patients who will benefit especially are the sub-acute chronic cases, who have practically no chance in the labour market in their previous occupations, but are really fit

for light work. For such time hangs very heavy, and the provision of this work, in the form of a useful hobby, will be a real boon and an accessory to treatment.

A typical week's working of the scheme shows :—

	£	s.	d.
(a) Monetary allowances	3	10	0
(b) Pasteurised milk... ..	1	8	0
(c) Eggs		15	2
(d) Butter		8	2
Total weekly liability ...	£6	1	4

(6) PUBLIC HEALTH (PREVENTION OF TUBERCULOSIS) REGULATIONS, 1925, & PUBLIC HEALTH ACT, 1925, SECTION 62.

It was not necessary to take action under the above during 1934.

MATERNITY & CHILD WELFARE.

(1) VITAL STATISTICS.

(a) Notification of Births Act.

The number of births reported to the Health Department in 1934 was as under :—

<i>Total Births</i> —Notified by midwives	593
„ „ doctors	151
„ „ relatives and others	140
Total	884

Maternal mortality, the number of deaths of mothers per 1,000 births, shewed in 1934 a welcome reduction from 6·7 to 3·6, more especially as the figure had been steadily mounting during the past 5 years. The average for that period was however, 3·7, which is below the average figure for the country.

The whole matter of maternal mortality, which has remained at a figure over 4 per 1,000 since the beginning of the century, has in recent years received the close attention of the Ministry of Health, Maternity and Child Welfare Authorities and the public health profession. As not one factor, but many, are concerned, local authorities have been urged to make their schemes as complete as possible. In this connection the Maternity and Child Welfare Committee propose to initiate the following services :—

(1) The provision of consultants for cases of difficult labour.

(2) The provision of hospital beds in the Municipal Hospital for such cases.

(3) The provision of hospital beds in the Municipal Hospital for ante-natal cases, when special medical treatment is indicated.

(4) The provision of home helps in the ante-natal period, where specially required, owing to the medical condition of the expectant mother.

(5) The provision of a certified midwife in doctors' cases where a handywoman would otherwise have been engaged.

In other directions, *e.g.*, ante-natal clinics, services in connection with cases of puerperal pyrexia, the provision of extra nourishment, the midwifery service of the District Nursing Association, the services already provided are remarkably complete.

M. and C.W. Table No. 1.

ANALYSIS OF INFANTILE AND MATERNAL MORTALITY FROM 1900—1934.

Year.	Births.		Maternal Mortality.		Infantile Mortality.		Infant Deaths 0-4 weeks.		Deaths from Diarrhoea and Enteritis.		Deaths from Pneumonia & Bronchitis.		Deaths from Congenital Debility, Prematurity and Atrophy, etc.	
	Births.	Rate.	Deaths.	Rate per 1000 Births.	Deaths under 1 year.	Rate per 1000 Births.	Deaths 0-4 weeks.	Rate per 1000 Births.	Deaths 0-2 years.	Rate per 1000 Births.	Deaths 0-1 year.	Rate per 1000 Births.	Deaths 0-1 year.	Rate per 1000 Births.
1900-04	1231	18.67	7	5.7	137	111	not available	24	19.5	24	19.5	23	18.7	7
1905-09	1100	17.4	5	4.5	105	95	38	34.5	15	13.6	16	14.5	19	17.3
1910-14	902	14.9	3	3.3	75	83	26	28.8	13	14.4	11	12.2	28	31.0
1915	809	15.5	3	3.7	79	97	35	43.3	1	1.2	17	21.0	36	44.5
1916	785	15.7	2	2.5	47	60	22	28.0	1	1.4	6	7.6	23	29.3
1917	759	15.1	not available	not available	59	78	not available	not available	6	7.9	not available	not available	25	32.9
1918	838	16.1	1	1.2	60	71	29	34.6	2	2.4	8	9.5	30	35.8
1919	784	13.0	4	5.1	56	71	33	42.1	3	3.8	6	7.7	32	40.8
1920	1146	19.1	3	2.6	59	51	28	24.4	9	7.9	6	5.2	31	27.1
1921	850	14.3	6	7.1	44	52	16	18.8	6	7.1	7	8.2	19	22.4
1922	930	15.6	8	8.6	46	49	32	34.4	3	3.2	4	4.3	29	31.2
1923	834	13.9	6	7.2	36	43	20	23.9	2	2.4	3	3.6	19	23.1
1924	778	12.9	4	5.1	54	69	29	37.3	1	1.3	11	14.1	30	38.6
1925	783	13.0	2	2.6	31	40	10	12.8	1	1.3	9	10.2	10	12.8
1926	770	12.6	1	1.6	49	64	18	23.4	6	7.8	12	15.6	10	13.0
1927	776	12.6	1	1.3	51	66	29	37.4	4	5.2	7	9.0	13	20.6
1928	752	12.0	3	4.0	38	51	17	23.9	2	2.7	8	10.6	13	17.3
1929	762	12.2	1	1.3	27	35	14	18.4	3	3.9	9	11.7	12	15.7
1930	767	12.2	2	2.6	44	57	21	27.4	2	2.6	9	11.7	17	22.2
1931	764	12.3	3	4.1	39	51	25	32.8	1	1.3	3	3.9	26	34.1
1932	752	11.9	4	5.3	33	44	11	14.6	1	1.3	11	14.6	14	18.6
1933	713	11.2	5	6.7	33	46	19	26.6	...	...	4	5.6	20	28.1
1934	805	12.6	3	3.6	29	36	14	17.3	...	...	8	9.9	14	17.3

1931. Net Deaths from Stated Causes at various ages under 1 year of age.

35

CAUSES OF DEATHS.	WARD DISTRIBUTION.										Net Births in the year		Net deaths in the year							
	Under 1 week.	1-2 weeks.	2-3 weeks.	3-4 weeks.	Total under 4 weeks.	4 weeks & under 3 months.	3 months and under 6 months.	6 months and under 9 months.	9 months and under 12 months.	Total deaths under 1 year.	All Saints.	St. Clement.	St. Mary's Lower.	St. Mary's Upper.	St. Helen's.	Holy Trinity.	St. Mary Magdalen.	St. Peter's.	St. Leonard.	Silverhill and Holington.
All Causes { Certified { Uncertified	13	...	...	1	14	4	3	2	6	29	2	5	1	1	2	3	4	2	5	4
Small Pox	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
Chicken Pox	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
Measles	...	...	...	...	...	...	...	...	1	1	...	...	...	...	...	...	1	...	...	...
Scarlet Fever	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
Diphtheria and Croup	...	...	...	...	...	...	...	...	1	1	1	...	...	...	...	...	...	...	...	...
Whooping Cough	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
Diphtheria	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
Eutritis	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
Tuberculous Meningitis	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
Abdominal Tuberculosis	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
Other Tuberculous diseases	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
Congenital Malformation	3	...	...	...	3	...	...	...	2	5	...	...	...	1	1	1	1	...	2	1
Premature Birth	9	...	...	...	9	...	...	...	...	9	...	3	1	...	1	2	1	...	1	...
Anaemia, Debility and Marasmus	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
Atelactasis	1	...	...	...	1	...	...	...	...	1	...	...	...	...	...	...	...	...	...	1
Injury at Birth	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
Erysipelas	...	...	...	...	...	...	...	...	1	1	...	...	...	...	...	...	...	...	...	1
Syphilis	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	1
Rickets	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
Mononitis	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
Convulsions	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
Gastritis	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
Laryngitis	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
Bronchitis	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
Pneumonia all forms	...	...	...	1	1	3	3	1	...	8	1	2	...	...	1	...	2	1	...	1
Subdural overlying	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
Other causes	...	...	...	...	...	1	...	1	1	3	...	...	...	...	...	...	...	1	2	...
Totals	13	...	...	1	14	4	3	2	6	29	2	5	1	1	2	3	4	2	5	4

Net Births in { legitimate 748
the year { illegitimate 57

Net deaths in { legitimate infants 24
the year of { illegitimate infants 5

(2) INSPECTION OF MIDWIVES AND ADMINISTRATION OF MIDWIVES' ACTS.

No. of Midwives on Register—Trained	...	16	—
No. of visits to Midwives, Inspections	...	43	
Special Visits and Interviews	... ..	2	—
	Total	45	—

Midwives' Notifications (Medical Help) :—

(a) Ante-Natal	... ..	14	
(b) Labour	... ..	108	
(c) Puerperium	... ..	8	
(d) Infant	... ..	29	—
	Total	159	—

Other Official Notifications :—

(a) Still-births	... ..	5	
(b) Liability to Infection	... ..	2	
(c) Artificial Feeding	... ..	3	
(d) Having laid out a Dead Body	.. ..	1	—
	Total	11	—

The total number of births notified by midwives was 593.

Ante-natal records are well kept, the midwives keeping in touch with the ante-natal clinics. The work done is good, no irregularity having been discovered during the year.

(b) Puerperal Fever and Pyrexia Regulations, 1926.

Under the above regulations the following arrangements were continued.

- (1) Hospital beds at the Royal East Sussex and the Municipal Hospitals, 4 cases being admitted during 1931.
- (2) The provision of consultants.
- (3) The provision of nursing by the District Nursing Association in cases treated at home.
- (4) Investigation into source of infection by Medical Officer of Health and, if necessary, the Inspector of Midwives.

(5) Bacteriological examinations of blood and lochia at the Laboratory of the Royal East Sussex Hospital.

Number of Notifications :—

Puerperal Pyrexia	14
„ Fever	1

(3) THE WORK OF THE HEALTH VISITORS.

Tables (a), (b), (c) and (d) deal fully with the work of the four health visitors, who are also employed as district school nurses, female visitors under the Mental Deficiency Acts, and as official infant protection visitors for boarded-out children under the Children's Acts of 1908 and 1932.

M. and C.W. Table No. 3.

(a) HOME VISITS (all visits included).

	First Visits.	Secondary Visits.	Total.
I. Babies under 1 year of age ...	829	3734	4563
II. Infants 1-5 years of age ...	42	4980	5022
III. Special Visits	232	142	374
IV. Expectant Mothers	179	410	589
Totals	1282	9266	10548

V. Unsuccessful visits included above ... 1481

(b) INFECTIOUS DISEASES (Visits included under (a)).

DISEASE.	Notified.	Visits.		No. Nursed D.N.A.	No. Admitted Hospital.
		No. Visited	Total Visits.		
I. Ophthalmia Neonatorum ...	4	1	4	...	4
II. Pemphigus Neonatorum...	...	...	...	...	...
III. Puerperal Fever	1	...	...	...	...
IV. Puerperal Pyrexia	14	4	7	2	4
V. Measles or German Measles	...	16	21	...	13
VI. Whooping Cough	...	45	61	...	7
VII. Epidemic Diarrhoea	...	1	3	...	...
VIII. Poliomyelitis	...	...	...	...	...
Totals	19	67	96	2	28

(c) SPECIAL INFORMATION RELATING TO OPHTHALMIA
NEONATORUM.

Notified.	Cases.		Vision Unimpaired.	Vision Impaired.	Total Blindness.	Deaths.	Removed from District.	Still under treatment at end of year.	Any other category.
	Treated.								
	At Home.	In Hospital							
4	..	4	3	...	...	...	...	1	..

(4) THE MATERNITY AND CHILD WELFARE CENTRES.

The work of the Centres, as the table shows, has been fully maintained, the total attendances having increased from 12,864 in 1933 to 13,553 in 1934. Again the valuable work of the voluntary association, with its band of willing and useful helpers, is most cordially and gratefully acknowledged.

During 1933, the Bulverhythe Clinic at West St. Leonards Infants' School was transferred to the Wesleyan Church Hall, Norman Road, much more central for the great majority of the mothers in the district to be served. The premises are more commodious and more convenient for an infant welfare centre, and the success of the new clinic is already assured.

At Halton, arrangements have been made for further co-operation with the district nurses in connection with the Ante-Natal Centre with good results already as regards increasing attendances. The additional session each month, at Park View Ante-Natal Clinic has more than justified itself.

A very large proportion of all babies born amongst the working class population, pass through the infant welfare centres, and practically all confinement cases booked by midwives pass through the two Ante-Natal Clinics or that of the District Nursing Association. The sum total of the influence brought to bear on these important groups must therefore from year to year be very great.

M. and C.W. Table No. 4.

Centre.	Medical Officer.	Day and Time.	New Cases.	Old Cases.	Total Attendances.	Medical Consultations.
Norman Rd.	Dr. G. Ticehurst	Tuesday, 3 p.m. ...	133	1969	2102	847
Halton ...	Dr. Phillips ...	Wednesday, 2.30 p.m.	137	2169	2306	1071
Park View...	Dr. Stanley ...	Thursday, 2.30 p.m.	119	2587	2706	1329
Central	Dr. Farnfield ..	Friday, 2.30 p.m. ...	199	4485	4684	1398
Hollington	Dr. Phillips ...	Friday, 2.30 p.m. ...	57	1380	1437	789
Halton,	Dr. Walker ...	1st & 3rd Mondays,				
Ante-Natal		2.30 p.m....	23	45	68	67
Park View	Dr. G. Ticehurst	1st, 2nd & 4th Wed-				
Ante-Natal		nesdays, 2.30 p.m.	106	144	250	247
		Totals ...	774	12779	13553	5748

(5) HOME HELPS.

Number of cases attended in 1934—29.

This work has materially increased during the past few years.

(6) MATERNITY HOMES.

During 1934, 17 cases, as compared with 13 in 1933, were sent by the Maternity and Child Welfare Committee to Fernbank Maternity Home, under the District Nursing Association. At the Municipal Hospital 71 births, as compared with 59 in 1933, were notified from the Maternity Ward.

The number of confinements in the Maternity section of the Municipal Hospital has practically doubled during the past four years. It should be noted that in addition to the lying-in ward, there is a special ward for ante-natal cases and also two single bedded wards for nursing mothers in the new Children's Annexe. Difficult and complicated labour cases can receive adequate attention, and cases of puerperal pyrexia and fever can be isolated in side wards apart from the maternity unit.

(7) DISTRIBUTION OF MILK.

This work is controlled by a special sub-committee, all cases being investigated by the Health Visitors and the Medical Officer of Health in the first instance.

The number of applications passed by the Sub-Committee during the year were :—

For Fresh milk ...	...	...	450
„ Dried milk ...	...	...	100

The amount represented being :—

Fresh milk ...	...	...	17,818 pints.
Dried milk ...	...	...	570 lbs.

(8) DENTAL TREATMENT.

25 Children under school age received dental treatment at school clinics ; 23 expectant or nursing mothers received treatment at the Royal East Sussex Hospital.

9 { ORTHOPÆDIC SCHEME. ULTRA-VIOLET RAY TREATMENT.

See Special Section.

(10) TREATMENT OF TODDLERS.

Children under the age of 5 years, not attending school, may receive treatment at one of the school clinics, 86 children having made 435 attendances in 1934. This represents a very substantial increase in the figures of previous years.

VENEREAL DISEASES CLINIC.

The venereal diseases clinic at the Royal East Sussex Hospital, a building specially provided and equipped for the purpose, serves, in addition to Hastings, the Borough of Bexhill and the neighbouring district of East Sussex. The clinic has the support and confidence of the medical practitioners of the town and district and is now sufficiently well known to the general public for all practical purposes. During the year two propaganda films were shewn, "Damaged Lives" on two separate weeks, "Shall the Children Pay?" for one week. The Sister at the V.D. Clinic devotes a certain proportion of her time to social work in connection with the female cases. In this connection the high proportion of cases of syphilis remaining under treatment until finally cured should be noted.

Dr. Lazarus Barlow, Medical Officer, reports as follows :—

"During the year 1934 the total number of new cases from Hastings attending the clinic for the first time was 101, a third as many again as in 1933, when the number was 75. There was an increase in the number of new cases of gonorrhœa from thirty to thirty-nine, but the number of new cases of syphilis was about the same, namely 15 instead of 17. The great increase in the numbers was due to those cases which on investigation proved to be non-venereal, the figure for this class of case rising from 28 in 1933 to 47 in 1934. This is evidence, I think, that the public has faith in the clinics and also realises the necessity of obtaining early advice in cases of doubt. In spite of a larger number of new cases the total number of attendances was approximately the same as in the previous year, *i.e.*, 3,681 as against 3,700 in 1933.

Ninety-nine fewer doses of arsenobenzene compounds were administered during the year: this is partly accounted for by the fact that in the year under review several patients were found to be intolerant to these drugs. The number of "in-patient days" shewed a considerable rise from 17 to 48.

Taking the work of the clinic as a whole, nearly 400 more attendances were made as compared with 1933. The male cases of gonorrhœa attended much more regularly both during clinic hours and for intermediate treatment, whereas the attendances on the part of the women were considerably down.

The fact that out of a total of 166 new cases from all parts 88 attended on the advice of their medical practitioner, shows that the clinic is well supported by the practitioners of the town and district. Needless to say everything relating to the clinic is carried out with the utmost secrecy."

VENEREAL DISEASES CLINIC.

COMPARATIVE STATEMENT OF WORK FOR YEARS 1929-1934.
HASTINGS CASES ONLY.

	1929	1930	1931	1932	1933	1934
Number of new cases suffering from:—						
(a) Syphilis	13	25	14	20	17	15
(b) Soft Chancre	nil	nil	1	nil	nil	nil
(c) Gonorrhœa	57	53	35	37	29	39
(d) Non-venereal conditions	44	47	35	27	29	47
Total	114	125	85	84	75	101
Total attendances out-patient clinic	5789	4506	4536	4133	3700	3681
In-patient days	172	67	139	247	17	48
Doses of Salvarsan:—						
Out-Patient Clinic... ..	316	445	395	488	464	365
In-Patient Department ...	nil	nil				
*Pathological Examinations:—						
(a) Examined by Medical Officer, V.D. Clinic ...	530	503	625	852	515	565
(b) Sent to approved laboratory	331	170	457	463	494	485

*These include all specimens.

MENTAL DEFICIENCY.

PARTICULARS OF MENTAL DEFECTIVES AS ON 1ST JANUARY, 1935.

(a) "SUBJECT TO BE DEALT WITH" BY THE LOCAL AUTHORITY.

(b) WHO MAY BECOME "SUBJECT TO BE DEALT WITH" BY THE LOCAL AUTHORITY.

Category.	Males.	Females.	Total.
A. NUMBER OF CASES "SUBJECT TO BE DEALT WITH":—			
1. UNDER "ORDER"—			
(a) (1) In Institutions (excluding cases on licence) { Under 16 years of age.	1	1	2
{ Aged 16 years and over.	7	28	35
(2) On licence from Institutions { Under 16 years of age.	...	...	...
{ Aged 16 years and over.	1	...	1
(b) (1) Under Guardianship (excluding cases on licence) { Under 16 years of age.	3	...	3
{ Aged 16 years and over.	16	21	37
(2) On licence from Guardianship { Under 16 years of age.	...	...	...
{ Aged 16 years and over.	1	1	2
2. In "places of safety" { Under 16 years of age.	...	1	1
{ Aged 16 years and over.	...	...	...
3. Under Statutory Supervision	14	16	30
Of whom—			
Awaiting removal to an Institution...	1	...	1
4. Action not yet taken under any one of the above headings			
(a) Notified by Local Education Authorities (Sec. 2 (2))	...	...	...

Category.		Males.	Females.	Totals.
(b) Mental Defectives in receipt of Poor Relief:—				
(1) Institutional	(a) In Public Assistance Institutions not approved under Sec. 37	...	...	...
	(b) In Institutions certified under the M. D. Acts including those approved under Sec. 37	...	...	...
	(1) Cases 'placed' under Sec. 3 ...	...	...	...
	(2) Other cases ...	2	6	8
(2) Domiciliary	...	...	...	...
(c) Otherwise "ascertained"	...	...	...	...
B. NUMBER OF CASES WHO MAY BECOME "SUBJECT TO BE DEALT WITH."—				
1. IN INSTITUTIONS OR UNDER GUARDIANSHIP—dealt with under Sec. 3:—				
(a) In regard to whom the Local Authority contributes under its permissive powers ..		2	...	2
(b) Maintained wholly by parents, relatives or others ..		...	...	...
(c) In approved Home—Local Authority contributes ..		1	...	1
2. Reported to the Local Authority from any reliable source but as to whom no action has been taken ..		6	6	12
3. Under Voluntary Supervision ..		...	3	3
Totals		55	83	138

Number of above Cases on the Registers of Occupation Centres:—

	M.	F.	Total.
Under Statutory Supervision ...	...	3	5
Under Voluntary Supervision	...	...	...
On Licence from Institutions	...	...	...
Under Guardianship ..	...	3	2
On Licence from Guardianship	...	...	...
Total	6	7	13

DURING THE YEAR 1934.

1. Cases notified by Local Education Authorities (Section 2 (2)) during the year 1934 :—

	M.	F.	Total.
Method of disposal—			
Sent to Institutions (by order)	...	...	...
Placed under Guardianship (by order)	...	...	...
Placed under statutory Supervision	...	1	1
Placed in "Places of Safety"	...	...	...
Died or Removed from Area	...	...	...
Action not yet taken—			
{ (a) In receipt of Poor Relief	...	...	...
{ (b) Others	...	...	...
Total	...	1	1

2. Of the total number of mental defectives known to the Local Authority :—

(a) Number who have given birth to children during 1934.

(1) After marriage } Nil.
(2) While unmarried }

(b) Number who have married during 1934 M. F.
 nil nil

The following figures show the steady increase in the working of the Mental Deficiency Scheme during the past 12 years :—

On January 1st, 1922—On books	...	29 cases.
" " 1925— "	...	58 "
" " 1928— "	...	99 "
" " 1931— "	...	108 "
" " 1934— "	...	129 "
" " 1935— "	...	138 "

(a) Ascertainment.

Every channel of information is utilised—*e.g.*, the Officers of the Committee, the Poor Law, the N.S.P.C.C., the Police. As seen above the numbers on the register are steadily increasing and have now reached over 2 per 1,000 of the population.

This number is bound to increase as practically all the younger defectives who are likely to require care and protection under the M.D. Acts are known, while from time to time for various economic and social reasons, adult cases are reported for investigation.

(b) Home Supervision.

The systematic monthly visitation of defectives, either under guardianship or at home under voluntary or statutory supervision, is carried out by the male and female officers of the Authority under the supervision of the Medical Officer of Health.

(c) Guardianship Cases.

These have increased from 38 to 42, either under the Brighton Guardianship Society or at home under the guardianship of their parents. In a certain proportion of stable cases, able to assist in the simple tasks of home life, and to attend an occupation centre—this may be the method of choice. In other cases it is "Hobson's choice" for want of suitable institutional accommodation.

(d) Institutional Cases.

These have increased from 35 to 37 and do not include eight defectives maintained in Institutions by the Public Assistance Committee. They are accommodated in the local Municipal Hospital and various institutions throughout the country, owing to the absence of suitable accommodation within the district.

With regard to Laughton Lodge, near Lewes, which is being developed by Brighton County Borough as a Colony for Mental Defectives, no further definite action has been taken. It is understood, however, that progress towards a county scheme in which Hastings will participate is being made.

(e) The Occupation Centre—Malton School Clinic.

This Centre, under the administration of the Local Voluntary Association for Mental Welfare, has continued to do excellent work for about 30 lower grade cases at home under guardianship or statutory or voluntary supervision, and for a

number of defectives from the Municipal Hospital. The pupils are taught table manners, rug making, raffia work, singing, dancing, rhythm, and a little elementary reading and writing, where possible.

(f) School for Delicate Children—Mental Wing.

This school, accommodating 65-68 pupils under the Education Committee, deals with the higher grade cases from the ages of 7-16. Many of the children are employable after leaving the Special School, and these are supervised by a Voluntary Committee. The remaining cases come under the supervision of the officers of the Mental Deficiency Committee. By these means few cases can now escape supervision or notification if necessary during the critical years of adolescence and early adult life.

(g) The Mental Treatment Act, 1930.

The numbers attending the special weekly clinic at the Royal East Sussex Hospital have gradually continued to increase. The clinic is particularly concerned with the observation and diagnosis of early or doubtful cases of mental disorder, and with the supervision of cases after their discharge from the Mental Hospital.

The absence of hospital beds for the diagnosis and treatment of early cases is a distinct disadvantage. It is possible that suitable accommodation may be provided at the Municipal Hospital as a result of certain alterations which are contemplated. Voluntary cases may be received from time to time at the East Sussex County Mental Hospital.

(h) The Local Government Act, 1930.

All mental defectives coming under the notice of the Public Assistance Committee are now referred to the Officers of the M.D. Committee for investigation and necessary action.

The Municipal Hospital is certified for 12 female and 12 male defectives, most of whom are usefully employed and also attend the occupation centre. On the books are eight defectives maintained at other institutions by the Public Assistance Committee.

SCHOOL MEDICAL SERVICE.

I am indebted to my deputy, Dr. H. J. Phillips, for the preparation of much of the report dealing with the School Medical Service.

Summary of Year's Work.

(a) Routine medical examination of 1,948 children in the elementary schools, 112 girls in the High School, and 81 children in the St. Leonards School for Delicate Children, 19 children in the Hastings School for Delicate Children, and 147 boys in the Grammar School.

(b) Medical examination and treatment, where necessary, at the two school clinics of 1,970 children, who made 13,585 attendances.

(c) 5,665 re-inspections by the Medical Officer at the schools and clinics.

(d) Examination by refraction of 346 cases of defective vision, 308 children being supplied with spectacles under the Authority's scheme.

(e) Operative treatment of 88 cases of enlarged tonsils or adenoids or of both conditions at the local hospitals.

(f) 2,259 cases of minor ailments treated at the two clinics.

(g) Provision of simple treatments, *e.g.*, lotions, ointments, dressings and nutritive drugs, total issues being 5,486.

(h) Dental inspection by the School Dentist of 5,306 children, 1,535 being actually treated during the year.

(i) Cleanliness inspections at the schools by the School Nurses, of 18,947 children inspected 813 being found defective in varying degrees and 8 cleansed at the public station.

(j) Control of infectious disease, with numerous visits by the staff to the schools and homes, the total exclusions being 410, total home visits 1,595.

(k) A complete orthopædic scheme for the treatment of crippling. (See special chapter).

(l) Medical supervision of the children at the Hastings and St. Leonards Schools for Delicate Children, the latter with two wings, one for the mentally retarded, the other open-air. (See special note).

1. STAFF.

See "Staff of the Health Department," pp. 6-7.

2. CO-ORDINATION WITH WORK OF OTHER HEALTH SERVICES.

- (a) Infant and Child Welfare.
- (b) Nursery Schools.
- (c) Debilitated Children under School Age.

See previous reports for full details.

(1) No *ad hoc* Nursery Schools have been established, but special arrangements have been made in all the Infant Schools for children under the age of five years, of whom a considerable proportion are between the ages of three and four years of age—for example:—

(a) Special chairs, tables, rests, blankets.

(b) Morning milk at $\frac{1}{2}$ d., or free in necessitous cases recommended by the school medical officer.

(2) The school clinics are available for the treatment of children under five years of age not attending school, but recommended through the Maternity and Child Welfare Service, both for ordinary medical treatment and diphtheria immunisation.

3. SCHOOL HYGIENE.

(a) Accommodation and attendances for the quarter ending December 31st, 1934:—

Total accommodation	...	...	8,887
Average number on registers	...	...	6,635
Average attendance	...	...	6,215
Percentage of attendance	...	...	93·6
Average attendance for 1934	...	...	6,131
Average attendance for 1933	...	...	6,214

The total number on the registers of the elementary schools on 31st December, 1934, shows a decrease of 228 as compared with the figures of last year. This can be explained by the fact that the birth-rate in 1920 stood out as exceptionally high, and the children born in that year were leaving during 1934. There will probably be still further reductions, though not quite so large, during the next four years.

Recommendations made during the year by the School Medical Officer regarding improvements in hygiene have received consideration by the appropriate committee. A substantial amount of repairs and hygienic improvements was carried out during the year at an approximate cost of £2,000.

In previous reports it has been pointed out that a considerable proportion of the elementary schools, especially the church schools, belong to an age and a type much below the accepted modern standard, for example as regards ventilation, lighting, heating, provision of cloakroom, means of drying clothes, etc. While there appears to be more than a sufficiency of school places in all the schools added together, the redistribution of a considerable proportion of the population in new houses, especially in the council estates on the periphery, has seriously enhanced the accommodation in certain schools, while in others there are numbers of empty places. The present situation will be further affected by clearance schemes already in being under the Housing Act of 1930 and any action which will be taken to deal with overcrowding under the new housing legislation of 1935. Eventually, no doubt, a decision will be made as to the amount of new building which will be required, the work to be spread over a period of years, while the remaining schools which must be used should come under a scheme for reconditioning and modernising. One new school, to replace St. Mary Star-of-the Sea, has been approved, and consideration has been given to the matter of a new school in the Ore district.

(b) Mid-day Meals informally served in the Schools.

The head-teachers in a considerable proportion of the schools have continued the previous arrangements as fully set out in recent reports.

4. MEDICAL INSPECTION. ELEMENTARY SCHOOLS.

(a) Age Groups of Children Inspected.

The total number of children examined at routine medical inspection in the elementary schools was 1,918, viz.: 612 entrants, 620 intermediates, and 686 leavers. In addition, 718 children with defects requiring observation or treatment, were re-inspected.

(b) **Schedule of Medical Inspection.**

The schedule comprises all the headings required by the Board of Education.

Every effort is made by the School Medical Service staff to avoid disturbance of the school time table.

5. { **FINDINGS OF MEDICAL INSPECTION.**
MEDICAL TREATMENT.

(a) **Uncleanliness.**

Table IV., Group 5. Uncleanliness and Verminous Conditions.

1. Average number of visits per school made during the year by the school nurses ...	11
2. Total number of examinations of children in the schools by school nurses	18,947
3. Number of individual children found unclean	843
4. Number of children cleansed under arrangements made by the Local Education Authority	8
5. Number of cases in which legal proceedings were taken :—	
(a) Under the Education Act, 1921 ...	Nil.
(b) Under School Attendance Bye-laws...	Nil.

The improvement in the cleanliness of the children was fully maintained.

(b) **Minor Ailments, including Skin Diseases.**

(1) **Ringworm.**

(a) **Scalp.**

Only one case was found during the year. This case was treated by X-Ray at Charing Cross Hospital with highly satisfactory results.

(b) **Body.**

Twelve cases were diagnosed and successfully treated at the school clinics.

(2) Scabies.

Ten cases were diagnosed and treated at the school clinic, and also at the cleansing station where sulphur baths and disinfection of clothing are available. Disinfection of bedding and rooms is also carried out where necessary.

(3) Impetigo.

Treatment with elastoplast, started last year, was continued through 1931. The results have come up to expectations and the practice will be continued. The considerable saving of the time of the school nurse is an important consideration.

(4) Other Skin Diseases.

A considerable number of children attending the school clinic belong to this group of minor injuries, burns, scalds, boils, septic sores, abscesses, etc., no fewer than 1,528 having received treatment during the year.

(5) Tonsils and Adenoids.

During the year 88 children were found to be suffering from chronic tonsillitis, the presence of adenoids or a combination of these defects of such degree as to warrant operative interference; in addition 112 children were referred for further observation for some minor degree of these defects.

These figures are practically the same as last year, the same conservative policy being followed. The results of the policy have been found to be highly satisfactory.

(6) Tuberculosis.

There is full co-operation between the School Medical and the Tuberculosis Services, both being under the control of the Medical Officer of Health, so that all actual or suspected cases among school children can be referred at once.

(7) External Eye Disease.

Of these 181 cases received treatment at the clinic, mainly cases of blepharitis, conjunctivitis, corneal ulcer, etc., specially referred either by the parents or the teachers.

(8) Defective Vision.

During the year 346 children were refracted at the school clinics ; 157 at Halton Clinic and 189 at Park View Clinic.

The following is a list of the findings:—

Emmetropia	...	...	...	19
Hypermetropia	...	...	...	39
Hypermetropic astigmatism	...	...	...	137
Myopia	...	...	...	48
High Myopia	...	...	...	1
Myopic astigmatism	...	...	...	61
Mixed astigmatism	...	...	...	41
Total				346

Included in this total were 41 cases of squint.

Spectacles were provided for 308 children under the authority's scheme.

(9) Ear Disease and Hearing.

This was discussed rather fully in last year's report. The same lines of treatment have been followed during 1934.

(10) Dental Treatment.

Mr. W. D. Penfold, School Dental Surgeon, reports :—" During the twelve months ending December 31st, 1934, 5,306 school children were examined for dental defects. Of these, 3,111, or 58 per cent., were found to require treatment, of whom 1,535 or approximately 50 per cent. accepted treatment. This percentage is slightly lower than that of the preceding year, but still shows a marked increase on previous years. This suggests that dental treatment is becoming more popular and that the public are slowly becoming more tooth conscious. There is, in fact, a definite, if slow, improvement in the response to the facilities offered. There is a decrease in the percentage found to require treatment. It may therefore be claimed that routine treatment is having a beneficial effect.

There are still, however, far too many cases, who persistently ignore the advice given them. Unfortunately many of these cases are amongst the older children who are shortly to leave school and so lose the opportunity of free treatment. Many appear to look upon the Clinics as conveniences to which they

can run in time of trouble, instead of taking steps to avoid trouble in the first place, by accepting routine treatment. The large number who attend for casual treatment after having refused routine treatment is evidence of this. It is feared that they will not be prevailed upon to accept routine treatment whilst this course is open to them.

The Senior Schools and the Infant Welfare Centres were visited in the latter part of the year by a demonstrator from the Dental Board, who gave interesting talks on the care of the teeth and displayed and explained many splendid models. This demonstrator remarked upon the intelligent interest taken by the children both in the talks and the models. Such talks might be of great use in breaking down the prejudices of many parents, if only it were possible to get them to attend. Unfortunately most of those who refuse treatment seem to believe in the old adage—"Where ignorance is bliss, 'tis folly to be wise."

6. INFECTIOUS DISEASES.

(a) Notifiable Infectious Diseases.

See section Infectious Diseases pages 16-20 for particulars of incidence, etc.

Further energetic attempts to continue diphtheria immunisation were made during the year. The response of the parents, however, was so indifferent as to render the results of doubtful utility in lowering the incidence of the disease.

Details of the actual work are appended.

				Halton Clinic.	Park View Clinic.
No. Schick tested	...	...	...	..	20
Percentage Schick positive	...	...	...	...	50%
No. immunised with T.A.M.	...	...	...	11	11
No. of immunised who received three full doses of T.A.M.	...	...	...	11	11
No. Re-Shicked	...	...	...	...	18
Percentage Schick positive	...	...	...	...	35%
No. who received prophylactic dose of Anti-Diphtheretic Serum as tem- porary measure	...	...	...	2	...

Further reference to the matter of diphtheria immunisation has been made in the section Infectious Diseases p. 17.

(b) Non-Notifiable Infectious Diseases.

It was not considered necessary to close any school, but closure of an individual class was carried out in one case for a severe epidemic of measles.

REPORTED BY HEAD TEACHERS, SCHOOL NURSES AND
SCHOOL ATTENDANCE OFFICERS.

Measles	...	...	...	...	96 cases.
German Measles	...	...	...	...	1
Whooping-cough	...	...	...	...	57
Chicken-pox	...	...	...	...	124
Mumps	...	...	...	...	295
Total					573

Exclusions from School.

410 children were excluded from school by the School Medical Officer for the following diseases:—

1.	Infectious Diseases (including Rheumatism and Influenza)	...	...	...	102
2.	Diseases of the Skin (including Ringworm)	...	...	...	107
3.	Inflammatory conditions of the Throat, Tonsilitis, Adenitis, etc.	...	...	...	72
4.	Nervous Conditions, including Chorea, Epilepsy, etc.	...	...	...	4
5.	Diseases of the Digestive System	...	...	...	...
6.	Bronchial Catarrh and Colds, etc.	...	...	...	49
7.	Heart Disease	...	...	...	1
8.	Injuries	...	...	...	4
9.	Diseases of the Ear	...	...	...	8
10.	Diseases of the Eye	...	...	...	33
*11.	Tuberculosis (definite or suspected)	...	...	...	...
12.	Other Diseases	...	...	...	30
Total					410

*This does not include children excluded by the Tuberculosis Officer.

The following certificates were given for schools in which the attendance fell below 60% under Grant Regulations 8 and 9.

Measles	...	...	...	5 certificates.
Whooping Coughs and Colds	...	...	...	2 certificates.

7. FOLLOWING UP. WORK OF SCHOOL NURSES.

Number of Schools (including Special School and Open Air Schools)	24
Visits of Nurses to Schools	267
" " " Departments	320
Visits to Homes:—	
By direct instruction of School Medical Officer	339
At request of School Attendance Officer ...	326
Following up cases of uncleanness ...	205
General cases, following up	554
School Visits—miscellaneous	376
Total	1,800

Examinations for cleanliness:—

Primary	17,824
Secondary	1,123
Total	18,947

{ 8. PHYSICAL TRAINING. GAMES.

There is no organiser of Physical Training, the class teachers being responsible for all special instruction.

The following extract of a report from Dr. Phillips, deputy School Medical Officer, deals with the incidence and treatment of minor orthopædic and postural conditions which are comparatively common in school children.

“The following is the number of children inspected and found to be suffering between 1st December, 1932, and the 31st December, 1934, from some minor postural defect, which defect was not considered, in the first place, to be of sufficient degree to warrant sending to the Orthopædic Clinic.

Total number of defective children suffering from minor orthopædic conditions	544
Total number of children inspected, approximately 1,000	

The main defects were as follows :—

Round Shoulders	...	...	...	106
Scoliosis	...	...	...	63
Pes Planus	...	...	...	312
Others	...	...	...	16
Some combination of the above	...			47
Total	...	...		<u>544</u>

All these children were referred to the respective head teachers for remedial exercises in order to correct the defect as much as possible.

Among these children who have been re-inspected the following state of affairs was found :—

Number of children who were apparently doing exercises in a satisfactory way	...	47
Number of children who were doing some exercises, but in an unsatisfactory way	...	63
Number of children who were doing no exercises at all	... ..	118
Number of children who were found at re-inspection to be so much worse, through lack of proper remedial measures, as to make it necessary to refer them to the Orthopædic Clinic	... ..	51
Total	... ..	<u>279"</u>

The vast bulk of these cases could quite well be dealt with in the schools, given appropriate exercises and skilled supervision. It is in this connection that the appointment of an organiser of physical training, working in co-ordination with the School Medical Officer, would be of great advantage. There would be an actual economy as regards the orthopædic clinic, which would only be utilised for the more severe cases, or cases which did not improve in the school remedial classes, and on the other hand, there would be definite and skilled treatment for a larger number of cases. There would be a great economy of school time.

9. PROVISION OF MEALS.

(a) Dinners for necessitous children on the same lines as in previous years were provided from 15th January to 28th March, 1934, the average number fed each day being 402. Dinners were also provided from 15th October, 1934, until the schools closed for the Christmas Holidays, 21st December, 1934, the average number fed each day during this period being 329. The School Medical Officer was in close touch with all the arrangements.

The restaurants were supervised and visited regularly by the school medical staff, the school attendance officers and teachers. The quality and quantity of the dinners were generally excellent.

(b) In addition to the dinners, lunch milk was provided throughout the year to a number varying from 10-29 children on the certificate of the School Medical Officer. These children are examined periodically as to the continuation of the milk.

The Children's Care Committee gave close attention during the autumn to the matter of the selection of the children for the midday meals and decided to adhere to their previous method, namely, primary selection by the head teacher on social and economic grounds of the children considered by them to be "unable by reason of lack of food to take full advantage of the education provided for them."

(c) Practically all the schools have in addition morning milk lunch schemes under the milk marketing board's scheme. At the end of the year 3,286 children out of a total of 6,635 on the registers, practically 50%, were having this milk, one-third of a pint at the cost of $\frac{1}{2}$ d. Under this scheme the source and quality of the milk must be approved by the Medical Officer of Health, the Board of Education recommending that when practicable pasteurised milk should be provided. In Hastings free milk provided by the Education Committee is pasteurised. As regards other milk, the standard accepted is pasteurised or milk reaching the standard of Grade A. The number of schools using pasteurised milk is slowly but definitely increasing.

The points with regard to pasteurised milk may be summarised as follows :—

- (1) The cleanliness, as revealed by bacterial counts, is as good, and indeed generally superior to Grade A milk.
- (2) The risk of carrying tubercle bacilli or any infectious disease is practically eliminated.
- (3) There is little, if, indeed, any, loss of food value.

Summing up. The nutrition of the children was, on the whole, well maintained during 1934, in spite of the difficult economic conditions prevailing, especially during the winter months : 13 children were referred for special treatment and 3 for observation from routine inspection as suffering from malnutrition.

10. SCHOOL BATHS.

Baths are not available at any of the elementary schools, but are provided at the School for Delicate Children, St. Leonards, and for cases of uncleanness, scabies, etc., specially referred, at the Disinfecting Station at Rock-a-Nore.

- 11. CO-OPERATION OF PARENTS.**
- 12. CO-OPERATION OF TEACHERS.**
- 13. CO-OPERATION OF SCHOOL ATTENDANCE OFFICERS.**
- 14. CO-OPERATION OF VOLUNTARY BODIES.**

At routine medical inspection the attendance of parents was 71·4 per cent.; refusals to permit examination 4·8 per cent.

Parents appreciate and use freely the facilities offered by the school medical service. I acknowledge with gratitude the constant help and sympathy accorded to us by the teachers, school attendance officers and the representatives of various official and voluntary societies.

15. BLIND, DEAF, DEFECTIVE & EPILEPTIC CHILDREN.

See Table III.—pp 76.-78.

(a) Ascertainment and General Treatment.

The special register is kept up-to-date. Appropriate treatment is secured for each case ascertained by some means or other either through the School Medical Service direct, or from the private practitioner, one of the local hospitals, or by sending the child to Chailey or other appropriate institutions.

(b) Mentally Defective Children—not in the Special School.

(1) THE DULL AND BACKWARD GROUP.

Children belonging to this group, not capable of being certified for the Special School, are referred to the Director of Education and the Headmaster for special attention.

Special classes have been established in certain schools, and are functioning successfully.

(2) THE LOW GRADE GROUP—NOT SUITABLE FOR THE SPECIAL SCHOOL.

These children are under the Mental Deficiency Committee and in suitable cases the Occupation Centre at Halton School Clinic is available.

(c) The Schools for Delicate Children.

(1) St. Leonards.

A. SPECIAL SCHOOL SIDE.

The number of children on the roll has been maintained at 67-68.

The health of the children has been satisfactory throughout the year, the average gain of weight having again been high. About one-third of the children at routine inspection had defects of varying degrees of severity requiring treatment.

Admissions —

Boys	...	...	8
Girls	...	...	3

Total 11

Discharged—

Placed under "After Care" Com-					
mittee	...	...	...	...	5
Placed under M.D. Committee ...					3
Sent to Institution	...	...	...	...	1
Removed from town	...	...	...	...	2
Total	...	...	...	...	10

The After Care Committee.

Fortunately most of the children who leave the school are able to take up some sort of work and are supervised by the voluntary "after care" committee, which held four meetings and arranged for the individual visiting of 38 former pupils each quarter. Three girls were married. Six cases of casual employment and three cases of persistent unemployment were investigated.

A very successful reunion of former pupils was held, 38 old boys and girls, the majority in steady employment, being present.

B. THE OPEN-AIR SIDE.

During the year 13 children were admitted, for the following reasons:—

Malnutrition, Debility and Anæmia ...	...	7
Heart Disease	...	1
Chronic Bronchitis	...	3
Rickets	...	1
Tuberculous Spine	...	1
Total	...	13

Thirteen children were discharged as fit to re-enter the ordinary schools.

The results have again been very satisfactory, especially in the case of children, who, arriving at the school at or about the age of five years malnourished, debilitated, anæmic, have been discharged to ordinary schools, after one or two years' treatment, full of energy and vigour. Special attention by appropriate exercises is given to minor orthopædic deformities with good results. The average gain in weight was 5 lbs., the highest 7½ lbs.

(2) **Hastings.**

At the Athelstan Road School for Delicate Children 23 children were discharged as fit to attend ordinary schools, 20 admitted for the following reasons:—

Malnutrition and Debility and Anæmia	...	11
Bronchitis	... ..	3
Heart Disease	... ..	2
Chorea	... ..	1
Tuberculous Glands of Neck, Non-Infectious		2
Hirschsprung's Disease	... ..	1
Total	...	<u>20</u>

The regime, as regards time table, rest, midday meal, morning lunch and afternoon snack, has been carried out as in previous years.

The average gain in weight for a period of 12 months has been 6 lbs.

The two open-air schools deal with 50-55 delicate children between the ages of 5 and 10 years. An extension of this treatment to older children is highly indicated.

As regards the temporary Hastings Open-Air School, attention was drawn to certain disadvantages in my report for 1933. It is hoped that a permanent open-air school may be established eventually.

**St. Leonards School for Delicate Children.
Mental Branch.**

**(A) RETURN OF DEFECTS FOUND BY MEDICAL INSPECTION IN
THE YEAR ENDED 31ST DECEMBER, 1954.**

DEFECT OR DISEASE.	Referred for Treatment	Referred for Observation.
MALNUTRITION	...	3
SKIN:		
Ringworm, Scalp	...	...
Ringworm, Body	...	...
Scabies	...	...
Impetigo...	...	...
Other Skin Diseases(Non-Tuberculous)	...	...

DEFECT OR DISEASE.	Referred for Treatment.	Referred for Observation.
EYE :—		
Blepharitis	1	...
Conjunctivitis	...	...
Keratitis	...	...
Corneal Opacities	...	...
Defective Vision (excluding squint) ...	8	2
Squint	...	...
Other conditions	...	...
EAR :—		
Defective Hearing	3	...
Otitis Media	...	...
Other Ear Diseases	...	...
NOSE AND THROAT :—		
Chronic Tonsillitis only	...	4
Adenoids only	...	...
Chronic Tonsillitis and Adenoids ...	3	4
Other Conditions	...	2
Enlarged Cervical Glands (Non-Tuberculous	...	...
Defective Speech	...	2
HEART AND CIRCULATION :—		
Heart Disease—		
Organic	...	...
Functional	...	4
Anæmia	3	2
LUNGS :—		
Bronchitis	...	1
Other Non-Tuberculous Diseases ..	...	...
TUBERCULOSIS :—		
Pulmonary—		
Definite	...	...
Suspected	...	...
Non-Pulmonary—		
Glands	...	...
Bones and Joints	...	...
Skin	...	...
Other Forms	...	...
NERVOUS SYSTEM :—		
Epilepsy	...	...
Chorea	...	...
Other Conditions	...	...
DEFORMITIES :—		
Rickets	...	...
Spinal Curvature	5	11
Other Forms	1	5
Other Defects and Diseases	...	3
Total	24	43

**(B) NUMBER OF INDIVIDUAL CHILDREN FOUND AT ROUTINE
MEDICAL INSPECTION TO REQUIRE TREATMENT
(EXCLUDING UNCLEANLINESS AND DENTAL DISEASES).**

Group.	Number of Children.	
	Inspected.	Found to require Treatment.
St. Leonards School for Delicate Children (Mental Branch) ...	59	19

**St. Leonards School for Delicate Children
(Physical).**

**(A) RETURN OF DEFECTS FOUND BY MEDICAL INSPECTION IN
THE YEAR ENDED 31ST DECEMBER, 1934.**

DEFECT OR DISEASE.	Referred for Treatment.	Referred for Observation.
MALNUTRITION	...	3
SKIN :—		
Ringworm, Scalp	...	...
Ringworm, Body	...	...
Scabies	...	...
Impetigo	...	...
Other Diseases (Non-Tuberculous) ...	...	...
EYE :—		
Blepharitis	...	...
Conjunctivitis	...	...
Keratitis	...	...
Corneal Opacities	...	...
Defective Vision (excluding Squint)...	1	...
Squint	...	...
Other Conditions	...	...
EAR :—		
Defective Hearing	...	...
Otitis Media	...	1
Other Ear Diseases	...	...
NOSE AND THROAT :—		
Chronic Tonsillitis only	...	...
Adenoids only	...	...
Chronic Tonsillitis and Adenoids ...	...	1
Other Conditions	...	...
Enlarged Cervical Glands (Non-Tuberculous)	.	1
Defective Speech	...	

DEFECT OR DISEASE.	Referred for Treatment.	Referred for Observation.
HEART AND CIRCULATION:—		
Heart Disease—Organic	...	...
Functional	...	4
Anæmia	1	2
LUNGS:—		
Bronchitis	...	...
Other Non-Tuberculous Diseases	...	...
TUBERCULOSIS:—		
Pulmonary—		
Definite	...	...
Suspected	...	...
Non-Pulmonary—		
Glands	...	...
Bones and Joints	...	...
Skin	...	...
Other forms	...	...
NERVOUS SYSTEM:—		
Epilepsy	...	...
Chorea	...	...
Other Conditions	...	...
DEFORMITIES:—		
Rickets	...	...
Spinal Curvature	...	2
Other Forms	...	1
Other Defects and Diseases	...	3
Total	2	18

(B) NUMBER OF INDIVIDUAL CHILDREN FOUND AT ROUTINE MEDICAL INSPECTION TO REQUIRE TREATMENT (EXCLUDING UNCLEANLINESS AND DENTAL DISEASES).

Group.	Number of Children.	
	Inspected.	Found to require Treatment.
St. Leonards School for Delicate Children (Physical) ..	22	2

Hastings School for Delicate Children (Physical).

(A) RETURN OF DEFECTS FOUND BY MEDICAL INSPECTION IN THE YEAR ENDED 31ST DECEMBER, 1934.

DEFECT OR DISEASE.	ROUTINE INSPECTIONS.	
	No. of Defects.	
	Requiring Treatment.	Requiring to be kept under Observation but not requiring Treatment.
MALNUTRITION	...	...
SKIN :—		
Ringworm, Scalp	...	...
Ringworm, Body	...	...
Scabies	...	...
Impetigo	...	...
Other Diseases (Non-Tuberculous) ...	...	...
EYE :—		
Blepharitis	...	...
Conjunctivitis	...	...
Keratitis	...	...
Corneal Opacities	...	...
Defective Vision (excluding Squint) ...	...	...
Squint	...	...
Other Conditions	...	...
EAR :—		
Defective Hearing	...	...
Otitis Media	...	...
Other Ear Diseases	...	...
NOSE AND THROAT :—		
Chronic Tonsillitis only	...	1
Adenoids only	...	...
Chronic Tonsillitis and Adenoids ...	...	1
Other Conditions	...	...
Enlarged Cervical Glands (Non-Tuber- culous)	...	...
Defective Speech	...	...
HEART & CIRCULATION :—		
Heart Disease— Organic	...	...
Functional	...	...
Anæmia	3	...
LUNGS :—		
Bronchitis	2	...
Other Non-Tuberculous Diseases ...	...	...

DEFECT OR DISEASE.	ROUTINE INSPECTIONS.	
	No. of Defects.	
	Requiring Treatment.	Requiring to be kept under Observation but not requiring Treatment.
TUBERCULOSIS :—		
Pulmonary—		
Definite	...	...
Suspected	...	...
Non-Pulmonary—		
Glands	...	...
Bones and Joints	...	...
Skin	...	...
Other Forms	...	...
NERVOUS SYSTEM :—		
Epilepsy	...	...
Chorea	...	...
Other Conditions	...	...
DEFORMITIES :—		
Rickets	2	1
Spinal Curvature	...	...
Other Forms	...	...
Other Defects and Diseases	2	...
Total	9	3

(B) NUMBER OF INDIVIDUAL CHILDREN FOUND AT ROUTINE MEDICAL INSPECTION TO REQUIRE TREATMENT (EXCLUDING UNCLEANLINESS AND DENTAL DISEASES).

Group.	Number of Children.	
	Inspected.	Found to require Treatment.
Hastings School for Delicate Children (Physical) ...	19	7

18. { **GIRLS' HIGH SCHOOL.**
BOYS' GRAMMAR SCHOOL.

Routine medical inspections were carried out in both schools.

All entrants and the children in the age groups indicated in last year's report were examined. The usual re-inspection and examination of special cases was carried out.

TABLE II.
High School for Girls.

(A) RETURN OF DEFECTS FOUND BY MEDICAL INSPECTION IN
 THE YEAR ENDED 31ST DECEMBER, 1934.

DEFECT OR DISEASE.	ROUTINE INSPECTIONS.	
	No. of Defects.	
	Requiring Treatment.	Requiring to be kept under Observation but not requiring Treatment.
MALNUTRITION	...	...
SKIN :—		
Ringworm, Scalp	...	...
Ringworm, Body	...	...
Scabies	...	...
Impetigo	...	...
Other Diseases (Non-Tuberculous) ...	...	...
EYE :—		
Blepharitis	...	...
Conjunctivitis	...	...
Keratitis	...	...
Corneal Opacities	...	...
Defective Vision (excluding Squint) ...	17	11
Squint	...	...
Other Conditions	...	...
EAR :—		...
Defective Hearing	...	...
Otitis Media	...	...
Other Ear Diseases	...	...

(B) NUMBER OF INDIVIDUAL CHILDREN FOUND AT ROUTINE MEDICAL INSPECTION TO REQUIRE TREATMENT (EXCLUDING UNCLEANLINESS AND DENTAL DISEASES).

Group.	Number of Children.	
	Inspected.	Found to require Treatment.
High School for Girls ...	112	17

TABLE II.

Grammar School for Boys.

(A) RETURN OF DEFECTS FOUND BY MEDICAL INSPECTION IN THE YEAR ENDED 31ST DECEMBER, 1934.

DEFECT OR DISEASE.	ROUTINE INSPECTIONS.	
	No. of Defects.	
	Requiring Treatment.	Requiring to be kept under Observation but not requiring Treatment.
MAI NUTRITION	...	...
SKIN :		
Ringworm	...	...
Scalp	...	...
Body	...	...
Scabies	...	...
Impetigo	...	...
Other Diseases (Non-Tuberculous) ...	...	...
EYE :		
Blepharitis	1	...
Conjunctivitis	...	...
Keratitis	...	...
Corneal Opacities	...	...
Defective Vision (excluding Squint) ...	22	4
Squint	...	...
Other Conditions	...	...

DEFECT OR DISEASE.	ROUTINE INSPECTIONS.	
	No. of Defects.	
	Requiring Treatment.	Requiring to be kept under Observation but not requiring Treatment.
Ear :		
Defective Hearing	...	...
Otitis Media	...	...
Other Ear Diseases	...	...
Nose and Throat:—		
Chronic Tonsillitis only	...	...
Adenoids only	...	...
Chronic Tonsillitis and Adenoids	...	...
Other Conditions	...	2
Enlarged Cervical Glands (Non-Tuberculous)	...	..
Defective Speech	...	...
Heart & Circulation :		
Heart Disease—Organic	...	..
Functional	..	2
Anæmia	...	...
Lungs :		
Bronchitis	...	...
Other Non-Tuberculous Diseases	...	1
Tuberculosis :		
Pulmonary—		
Definite	...	...
Suspected	...	...
Non-Pulmonary—		
Glands	...	...
Bones and Joints	...	...
Skin	...	...
Other Forms	..	...
Nervous System :		
Epilepsy	...	...
Chorea	...	...
Other Conditions	...	...
Deformities :		
Rickets	...	...
Spinal Curvature	8	...
Other Forms	18	5
Other Defects and Diseases	.	2
Total	49	16

**(B) NUMBER OF INDIVIDUAL CHILDREN FOUND AT ROUTINE
MEDICAL INSPECTION TO REQUIRE TREATMENT
(EXCLUDING UNCLEANLINESS AND DENTAL DISEASES).**

Group.	Number of Children.	
	Inspected.	Found to require Treatment.
Grammar School for Boys	127	42

19. EMPLOYMENT OF CHILDREN & YOUNG PERSONS.

Number of licences issued to children in 1934	...	187
Number of such children medically examined	...	112
Number of such children rejected	... ..	3

Description of the work at which the children were employed and number of children so employed:—

Delivery of papers	...	...	...	...	125
„ „ milk	...	...	...	...	6
Errands	...	...	...	...	53
Housework	...	...	...	...	3
Total					187

A number of children are also employed under licences granted previous to 1934.

In addition to the above, 10 children were licensed to take part in Entertainments, each child being medically examined before the issue of the licence.

20. SPECIAL ENQUIRIES.

**Observations on Children in Receipt of Lunoh Milk from
Education Committee, 1934.**

MEDICAL REASONS FOR SUPPLYING MILK.

Malnutrition	...	...	...	...	15
Malnutrition and Anæmia	...	...	...	...	3
Debility	...	...	...	...	6
Anæmia and Rickets	...	...	...	...	4
					28

Highest weight gained	...	7 lbs.	in 12 months.	
Lowest	...	3 „	„ 9 „	

21. MISCELLANEOUS.

Sixty-three entrants for scholarships to the High School for Girls and Grammar Schools for Boys received a special medical examination. The School Medical Officer advised the Education Committee with regard to medical matters in connection with the engagement of teachers, and teachers on the sick list, etc.

MEDICAL INSPECTION RETURNS. ELEMENTARY SCHOOLS.

TABLE I.—RETURN OF MEDICAL INSPECTIONS.

(A) Routine Medical Inspections.

NUMBER OF INSPECTIONS IN THE PRESCRIBED GROUPS.

Entrants	642
Second Age Group	620
Third Age Group	686
Total	1,948

NUMBER OF OTHER ROUTINE INSPECTIONS ... 359

(B) Other Inspections.

NUMBER OF SPECIAL INSPECTIONS	1,991
NUMBER OF RE-INSPECTIONS	5,665
Total	7,656

TABLE II.

Elementary Schools.

(A) RETURN OF DEFECTS FOUND BY MEDICAL INSPECTION IN
THE YEAR ENDED 31ST DECEMBER, 1934.

DEFECT OR DISEASE.	ROUTINE INSPECTIONS.		SPECIAL INSPECTIONS.	
	No. of Defects.		No. of Defects.	
	Requiring Treatment.	Requiring to be kept under Observation but not requiring Treatment.	Requiring Treatment.	Requiring to be kept under Observation, but not requiring Treatment.
MALNUTRITION	12	3	1	...
SKIN :—				
Ringworm, Scalp	...	...	1	...
Ringworm, Body	1	...	12	...
Scabies	...	...	10	...
Impetigo	9	...	224	...
Other Diseases (Non-Tuberculous)	11	5	197	1
Minor Injuries, Bruises, Sores, Chilblains, etc.	5	1	666	...

DEFECT OR DISEASE.	ROUTINE INSPECTIONS.		SPECIAL INSPECTIONS.	
	No. of Defects.		No. of Defects.	
	Requiring Treatment.	Requiring to be kept under Observation but not requiring Treatment.	Requiring Treatment.	Requiring to be kept under Observation but not requiring Treatment.
EYE :—				
Blepharitis	6	1	37	...
Conjunctivitis	...	...	28	...
Keratitis	...	1	...	...
Corneal Opacities	...	...	...	...
Defective Vision	103	45	91	1
(excluding Squint)				
Squint	10	7	17	...
Other Conditions	1	3	116	...
EAR :—				
Defective Hearing	22	6	14	1
Otitis Media	1	...	28	...
Other Ear Diseases	3	...	64	1
NOSE AND THROAT :—				
Chronic Tonsillitis only	5	101	25	15
Adenoids only	2	9	12	6
Chronic Tonsillitis and Adenoids	13	8	13	3
Other Conditions	4	42	188	1
Enlarged Cervical Glands (Non-Tuberculous)	1	14	21	1
Defective Speech	...	2	...	...
HEART & CIRCULATION :—				
Heart Disease—Organic	..	2	1	...
Functional	...	25	1	1
Anæmia	9	...	29	1
LUNGS :—				
Bronchitis	12	3	6	...
Other Non-Tuberculous Diseases	1	...	4	...
TUBERCULOSIS :—				
Pulmonary—				
Definite	...	...	...	...
Suspected	...	...	...	...
Non-Pulmonary—				
Glands	...	...	...	...
Bones and Joints	...	...	...	...
Skin	...	...	...	...
Other Forms... ..	...	...	...	...

DEFECT OR DISEASE.	ROUTINE INSPECTIONS.		SPECIAL INSPECTIONS.	
	No. of Defects.		No. of Defects.	
	Requiring Treatment.	Requiring to be kept under Observation but not requiring Treatment.	Requiring Treatment.	Requiring to be kept under Observation but not requiring Treatment.
NERVOUS SYSTEM :—				
Epilepsy	...	..	...	...
Chorea	...	...	..	...
Other Conditions ...	2	...	...	...
DEFORMITIES :—				
Rickets	69	14	10	...
Spinal Curvature ...	14	30	...	...
Other Forms	89	227	21	...
Other Defects and Diseases	23	36	530	1
Total ..	428	585	2367	33

(B) NUMBER OF INDIVIDUAL CHILDREN FOUND AT ROUTINE MEDICAL INSPECTION TO REQUIRE TREATMENT (EXCLUDING UNCLEANLINESS AND DENTAL DISEASES).

Group.	Number of Children.	
	Inspected.	Found to require treatment.
Prescribed Groups :—		
Entrants	642	126
Second Age Groups...	620	108
Third Age Groups ...	686	119
Total (Prescribed Groups)	1,948	353
Other Routine Inspections...	359	87
Grand Total ...	2,307	440

Table III. Return of all Exceptional Children in the Area.

CHILDREN SUFFERING FROM MULTIPLE DEFECTS.

Nil.

BLIND CHILDREN.

At Certified Schools for the Blind.	At Public Elementary Schools.	At Other Institutions.	At no School or Institution.	Total.
2	...	...	...	2

PARTIALLY SIGHTED CHILDREN.

At Certified Schools for the Blind.	At Certified Schools for the Partially Sighted.	At Public Elementary Schools.	At Other Institutions.	At no School or Institution.	Total.
1	...	2	...	...	3

DEAF CHILDREN.

At Certified Schools for the Deaf.	At Public Elementary Schools.	At Other Institutions.	At no School or Institution.	Total.
3	...	...	...	3

PARTIALLY DEAF CHILDREN.

At Certified Schools for the Deaf.	At Certified Schools for the Partially Deaf.	At Public Elementary Schools.	At Other Institutions.	At no School or Institution.	Total.
...	...	1	...	...	1

MENTALLY DEFECTIVE CHILDREN.

FEEBLE-MINDED CHILDREN.

At Certified Schools for Mentally Defective Children.	At Public Elementary Schools.	At Other Institutions.	At no School or Institution.	Total.
64	3	...	...	67

EPILEPTIC CHILDREN.

CHILDREN SUFFERING FROM SEVERE EPILEPSY.

At Certified Special Schools.	At Public Elementary Schools.	At Other Institutions.	At no School or Institution.	Total.
1	...	...	2	3

PHYSICALLY DEFECTIVE CHILDREN.

A. TUBERCULOUS CHILDREN.

I.—CHILDREN SUFFERING FROM PULMONARY TUBERCULOSIS.

(Including pleura and intra-thoracic glands.)

At Certified Special Schools.	At Public Elementary Schools.	At Other Institutions.	At no School or Institution.	Total.
...	...	...	...	...

II.—CHILDREN SUFFERING FROM NON-PULMONARY TUBERCULOSIS.

At Certified Special Schools.	At Public Elementary Schools.	At Other Institutions.	At no School or Institution.	Total.
6	7	...	1	14

B. DELICATE CHILDREN.

At Certified Special Schools.	At Public Elementary Schools.	At Other Institutions.	At no School or Institution.	Total.
44	100	...	2	146

C. CRIPPLED CHILDREN.

At Certified Special Schools.	At Public Elementary Schools.	At Other Institutions.	At no School or Institution.	Total.
5	22	1	1	29

D. CHILDREN WITH HEART DISEASE.

At Certified Special Schools.	At Public Elementary Schools.	At Other Institutions.	At no School or Institution.	Total.
4	8	...	2	14

**Table IV. Return of Defects Treated during the Year ended
31st December 1934.**

TREATMENT TABLE.

GROUP I. MINOR AILMENTS (EXCLUDING UNCLEANLINESS).

DISEASE OR DEFECT.	NUMBER OF DEFECTS TREATED, OR UNDER TREATMENT DURING THE YEAR.		
	Under the Authority's Scheme.	Otherwise.	Total.
SKIN :—			
Ringworm, Scalp—	1	...	...
(i) X-Ray Treatment ...	...	...	...
(ii) Other ...	12	...	...
Ringworm, Body ...	10	...	...
Scabies ...	224	...	...
Impetigo ...	197	...	...
Other Skin Diseases ...	181	...	...
MINOR EYE DEFECTS ...	106	...	...
(External and other, but excluding cases falling in Group II.)	1,528	3	1,531
MINOR EAR DEFECTS ...	...	...	...
MISCELLANEOUS ...	...	...	...
(e.g., minor injuries, bruises, sores, chilblains, etc).	2,259	3	2,262
TOTALS ..	...	...	...

GROUP II. DEFECTIVE VISION AND SQUINT (EXCLUDING MINOR EYE DEFECTS TREATED AS MINOR AILMENTS.—GROUP I.).

DEFECT OR DISEASE.	NUMBER OF DEFECTS DEALT WITH.		
	Under the Authority's Scheme.	Otherwise.	Total.
ERRORS OF REFRACTION ... (Including Squint).	345	12	357
OTHER DEFECT OR DISEASE OF THE EYES ... (Excluding those recorded in Group I.)	1	...	1
TOTAL ...	346	12	358

Total number of Children for whom spectacles were prescribed :—

(a) Under the Authority's Scheme ... 311

(b) Otherwise ... 12

Total number of Children who obtained or received spectacles :—

(a) Under the Authority's Scheme ... 308

(b) Otherwise ... 12

GROUP III. TREATMENT OF DEFECTS OF NOSE AND THROAT.

NUMBER OF DEFECTS.													
RECEIVED OPERATIVE TREATMENT.											Received other forms of Treatment.	Total No. Treated.	
Under the Authority's Scheme, in Clinic or Hospital. (i)				By Private Practitioner or Hospital apart from the Authority's Scheme. (ii)				Total. (iii)					
(i)	(ii)	(iii)	(iv)	(i)	(ii)	(iii)	(iv)	(i)	(ii)	(iii)	(iv)	(iv)	(v)
14	21	53	—	—	—	3	—	14	21	56	—	206	297

(i) Tonsils only. (ii) Adenoids only. (iii) Tonsils and Adenoids.

(iv) Other defects of the nose and throat.

GROUP IV. ORTHOPÆDIC AND POSTURAL DEFECTS.

	Under the Authority's Scheme. (1)		
	Residential treatment with education. (i)	Residential treatment without education. (ii)	Non-residential treatment at an orthopaedic clinic. (iii)
Number of children treated ...	3	5	91

Otherwise. (2)			Total number treated.
Residential treatment with education. (i)	Residential treatment without education. (ii)	Non-residential treatment at an orthopaedic clinic. (iii)	
—	—	—	94

GROUP V.—DENTAL DEFECTS.

(1) Number of Children who were:—

(a) Inspected by the Dentist:—

		Aged.			
Routine Age Groups	{	5	...	319	} Total ... 4,755
		6	...	508	
		7	...	369	
		8	...	510	
		9	...	627	
		10	...	492	
		11	...	595	
		12	...	618	
		13	...	518	
		14	...	199	
Specials	...	...	...	...	551
Grand Total					5,306

(b) Found to require treatment ... 3,111

(c) Actually treated ... 1,535

(2) Half-days devoted to { Inspection 34 } Total ... 475
{ Treatment 441 }

(3)	Attendances made by the Children for treatment	...	...	3,512
(4)	Fillings	...	{ Permanent teeth 1,192 } { Temporary teeth 694 }	Total ... 1,886
(5)	Extractions	...	{ Permanent teeth 318 } { Temporary teeth 1,704 }	Total ... 2,022
(6)	Administration of general anæsthetics for extractions	...		339
(7)	Other Operations		{ Permanent teeth 203 } { Temporary teeth }	Total ... 203

GROUP VI.—UNCLEANLINESS AND VERMINOUS CONDITIONS.

(i.)	Average number of visits per school made during the year by the School Nurses	...	...	...	...	...	...	11
(ii.)	Total number of examinations of children in the Schools by School Nurses	...	...	...	...	...	...	18,947
(iii.)	Number of individual children found unclean	...	...	...	...	...	...	843
(iv.)	Number of children cleansed under arrangements made by the Local Education Authority	...	...	...	...	...	...	8
(v.)	Number of cases in which legal proceedings were taken :—							
	(a) Under the Education Act, 1921	...	...	...	...	...	...	nil.
	(b) Under School Attendance Byelaws	...	...	...	...	...	...	nil.

ORTHOPÆDIC CLINIC.

THE PREVENTION AND TREATMENT OF CRIPPLING.

The Orthopædic Clinic at the Royal East Sussex Hospital deals with the following classes of cases :—

- (a) Children of school age.
- (b) Infants under school age.
- (c) Cases of tuberculosis of all ages.

The scheme includes :—

- (a) **Consultation and Systematic Supervision of treatment by the Orthopædic Surgeon.**
- (b) **Remedial Treatment at the Clinic by the Orthopædic Surgeon and Nurse.**
- (c) **Specialised Treatment, *e.g.*, Ultra-violet Rays and X-Ray.**
- (d) **In-Patient Treatment.**

At the Royal East Sussex Hospital for short periods.

- (e) **Institutional Treatment, with Education.**

at the Chailey Heritage for cripples and the sea-side branch at Bishopstone.

Cases attending Orthopædic Clinic, December 31st, 1934 :—

(a) SCHOOL MEDICAL SERVICE.

Infantile Paralysis	...	...	12 cases.
Congenital Conditions	...	...	6 „
Scoliosis and Kyphosis	...	...	15 „
Miscellaneous	...	...	24 „
Total			57 „

(b) MATERNITY AND CHILD WELFARE.

Infantile Paralysis	...	...	1 cases.
Congenital Conditions	...	...	3 „
Rickets	...	...	4 „
Miscellaneous	...	...	10 „
Total			18 „

(c) TUBERCULOSIS 4 cases.

The total attendances during the year were 4,846, not including 407 attendances for ultra-violet-ray treatment. The number of new cases referred for treatment were :—

	Orthopædic.		Light Treatment.	
Maternity and Child Welfare Service	20	...	10	
School Medical Service	...	...	...	...
Tuberculosis	...	...	...	5
Total		67	15	

The number of children receiving institutional treatment and education at Chailey was 9, and one boy was treated at the Shaftesbury Residential Home for Cripples in Hastings.

The indications for light treatment have been mainly surgical tuberculosis, marasmus and debility in babies, also rickets.

Quarterly reports are submitted to the Medical Officer of Health by the surgeon in charge of the Orthopædic Clinic, showing the progress of all cases in attendance, making recommendations as to further treatment, and noting particularly cases considered cured, or those failing to attend regularly. Cases discharged as cured are watched at school and at the school or infant welfare clinics for any sign of relapse, and those who have ceased to attend or only attend intermittently are followed up in the homes by the

Health Visitors and School Nurses. Following up on these lines is an essential part of any orthopædic scheme.

In addition, close attention is given to early and minor orthopædic faults of posture, flat foot, etc., in the schools and clinics from a preventive standpoint, and also in order that corrective exercises can be explained to the teachers to be carried out in the schools.

REPORT ON PUBLIC HEALTH BACTERIOLOGICAL WORK, 1934.

This work is carried out in the laboratory of the Royal East Sussex Hospital under Dr. P. Lazarus-Barlow, Pathologist to the Hospital, the following being a summary of the results for 1934.

SOURCE OF SPECIMENS.	NATURE OF SPECIMENS.	No.
A. General Practitioners, Borough Sanatorium, Medical Officer of Health.	Sputum for Tubercle Bacilli	166
	Throat Swabs for Diphtheria	726
	Widal Examination for Typhoid Group ...	4
	Miscellaneous	95
B. School Medical Service.	Throat Swabs for Diphtheria, etc.	104
C. Tuberculosis Dispensary.	Sputum for Tubercle Bacilli	63
	Miscellaneous	2
D. Municipal Hospital	Miscellaneous	136
	Total Specimens examined	1296

DIPHTHERIA ANTI-TOXIN.—Supplies are kept at the Health Department and at Police Stations, and issued on request to the medical practitioners of the town.

GENERAL SANITARY ADMINISTRATION.

(1) LOCAL ACTS AND ORDERS, BYELAWS, ADOPTIVE ACTS.

During the past year no additions or amendments were reported.

(2) PUBLIC HEALTH PROPAGANDA.

(a) Owing to financial reasons the issue of "Better Health," Hastings edition, was discontinued in 1934. This monthly journal, which has a very large circulation throughout the country, was undoubtedly productive of much good in the dissemination of valuable information dealing with medical matters generally, focussing particularly on their public health aspects. Further, exact lists of the clinics and other activities of the health department were published for the guidance of the public. It is hoped that it may be possible to arrange for the Hastings edition of "Better Health" to be resumed.

(b) Health propaganda forms a definite and important part of the daily work of all Medical Officers, the School Dentist, Sanitary Inspectors and Health Visitors and School Nurses.

(c) The voluntary health societies at their annual meetings generally arrange for a well-known speaker on some health subject.

(3) NURSING HOMES (REGISTRATION) ACT, 1928.

Year ending December 31st, 1934.

	Maternity Homes.	General Nursing Homes.	Maternity & General Nur- sing Homes.
1. Number of applications for registration	...	2	1
2. Number of Houses registered	...	2	1
3. Number of orders made refusing or cancelling registration ..	..	...	...
4. Number of appeals against such orders	..	...	...
5. Number of cases in which such orders have been			
(a) confirmed on appeal	...	...	...
(b) disallowed	...	...	...
6. Number of applications for exemption from registration ..	..	...	...
7. Number of cases in which exemption has been			
(a) granted	...	...	...
(b) withdrawn	...	...	...
(c) refused	...	...	...

Eight Maternity Homes and 26 General Nursing Homes altogether are registered.

A thorough inspection and investigation is made by the Medical Officer of Health on application for registration.

The Model Byelaws of the Ministry of Health are in force, all homes being periodically inspected by the Medical Officer of Health.

(4) WATER SUPPLY.

In spite of the long continued drought of 1933 and 1934, the water supply from the new reservoir and gathering grounds at Great Sanders, and 8 deep wells in the Ashdown Sand was generally sufficient for all requirements. At the same time, in view of the increase in the number of new houses, and more especially the increasing numbers from slum clearance schemes and overcrowded areas who will in a few years be using bathrooms for the first time, it is understood that further sources of supply are being investigated with a view to necessary action being taken.

The apparatus for the treatment of minute quantities of iron and manganese in the water and the Paterson's gravity type mechanical filters have functioned satisfactorily throughout the year.

The following are copies of recent analysis, both chemical and bacteriological :—

The Laboratory,
42, George Street, Hastings.
20th December, 1933.

Report on the Chemical Examination of Water No. 185.

Appearance :—Clear. Good.

Reaction :—Neutral—PH. 8.2.

Ammonia, free and Saline	...	...	·004	} Parts per 100,000
Ammonia, albumenoid	...	...	·008	
Oxygen absorbed in 3 hrs. at 37° C.	...	...	·025	
Chlorine as Chlorides	...	...	14.3	
Nitrogen as Nitrates	...	...	Trace	
Total Hardness	...	...	14.0	

Remarks.

This water is organically pure. No injurious metals are present and in my opinion there is nothing that could cause illness.

G. M. NORMAN,

Public Analyst.

27th December, 1933.

Report on the Bacteriological Examination of a sample of water. Received 11th October, 1934. From Hastings Corporation.

Number of colonies per cubic centimetre of water growing upon nutrient gelatine at 20°C in three days	4
Number of colonies per cubic centimetre of water growing upon agar at 37°C in one day	4
Smallest quantity of water giving acid and gas in bile-salt glucose broth	Absent in 100 c.c.
Smallest quantity of water giving gas in bile-salt lactose broth	" " "
Smallest quantity of water containing the <i>Bacillus Coli</i>	" " "
Smallest quantity of water giving the reaction of the <i>B. Welchii</i> (<i>Bacillus Enteritidis Sporogenes</i>)	" " "

This is a clear and bright water of a very high degree of bacterial purity. It is a pure and wholesome water suitable for Public Supply purposes.

JOHN F. BEALE.

For Drs. Beale and Suckling.

(5) DRAINAGE AND SEWERAGE.

A considerable amount of inspection and repair work is carried out in individual houses (see Sect. (7)) under the Sanitary Inspectors.

During the year the Borough Engineer completed his survey of the existing sewerage arrangements, and formulated his proposals for the replanning and modernisation of the whole of the sewage disposal of the Borough. The scheme was presented to the Council early in 1935, so that any remarks belong properly

to the report for 1935. It is sufficient to state that the scheme deals in a most complete manner with the various problems—and includes:—

(1) A SYSTEM OF STORM SEWERS AND FLOOD RELIEF.

This should effectively get rid of the flooding which from time to time takes place in the low lying parts of the town.

(2) NEW SOIL SEWERS.

These will be provided wherever necessary.

(3) SEWAGE DISPOSAL.

The following proposals are made:

(a) All soil sewage and a certain amount of storm sewage, will be taken to the outflow at the East end of the town.

(b) Special methods of sewerage and disintegration will be utilised.

(c) To avoid accumulation during high tides the sewage will be pumped.

It is proposed to carry out the huge scheme of sewage reform in 17 sections, the whole of the work to be spread over a period of nearly 10 years.

(6) SCAVENGING.

The collection and disposal of house and business refuse is carried out by the Borough Engineer's department.

There is evidence that the removal of refuse from shops, restaurants, boarding-houses, etc., is now more effective, especially in the summer months, and no doubt, there will be continuous improvement with the introduction of the large, covered in motor collecting vehicles recently installed.

I again emphasise how much residents can assist the cleansing department in the disposal of house refuse by means of burning what can be conveniently burnt, or wrapping up organic refuse tightly in newspapers, before placing it in the dustbin.

The Health Department co-operates in the replacement of existing insanitary bins, and also in connection with the provision of regulation dustbins to replace existing insanitary ash-pits.

During 1934, the Rock-a-Nore refuse destructor was shut down, and all house refuse has been tipped, under the modern system of controlled tipping at Pebsham Farm—where the site will ultimately be used as an Aerodrome.

(7) SANITARY INSPECTION OF DISTRICT.**(a) SANITARY INSPECTORS' SUMMARY FOR 1934.**

1.	Visits of inspection to drainage works in progress	470
2.	Visits of inspection to works in connection with notices ...	958
3.	Visits to outworkers' premises	9
4.	Inspection of bakehouses	107
5.	„ „ slaughterhouses	2,640
6.	„ „ dairies, cowsheds and milk shops	241
7.	Enquiries respecting Infectious Diseases, etc.	213
8.	Drain tests applied	184
9.	Houses and premises provided with new water-tight drains, properly intercepted and ventilated	22
10.	Cesspools emptied and cleansed	1
11.	Cesspools abolished	1
12.	Drains cleared and amended	151
13.	New iron and lead soil and ventilating pipes fixed ...	45
14.	New closets fixed	70
15.	Closets amended	18
16.	New flushing boxes provided, necessary storage cisterns being fixed where required	36
17.	Flushing boxes repaired	20
18.	Glazed stoneware sinks fixed, fitted with proper wastepipes and trapped where necessary	17
19.	Yards repaved	31
20.	Sanitary ashbins provided	305
21.	Accumulations of manure and other refuse removed ...	60
22.	Rooms, etc., cleansed and whitewashed	335
23.	Nuisances abated from animals improperly kept	18
24.	Nuisances abated from chimneys sending forth black smoke	—
25.	Nuisances abated from overcrowding	9
26.	Miscellaneous repairs	366
27.	New W.C.'s erected	1
28.	New urinals constructed	1
29.	Inspection of premises where food is exposed for sale ...	2,293

(b) General Summary.

Inspection and Re-inspection of premises—visits ...	8 562
Houses and Premises inspected	3,418
Complaints investigated	759
Complaints investigated under Rats and Mice (Destruction) Act	235

PRELIMINARY NOTICES.

Number of Notices served during the year 1934...	236
„ „ „ complied with during the year 1934	226
„ „ „ not complied with during the year 1934	10
„ „ „ reported to the Public Health Com- mittee during the year 1934 ..	10
„ „ „ served during the year 1934 which are still receiving attention ...	10
„ „ „ served during the year 1934 which were partly complied with ..	—

OTHER NOTICES.

Legal Notices served by Town Clerk	...	...	...	15
Premises inspected under Increase of Rent and Mortgage				
Interest (Restrictions) Acts, 1920 to 1933	...			1
Certificates granted	do.	do.	..	1

MILK AND DAIRIES (CONSOLIDATION) ACT, 1915.

MILK AND DAIRIES (AMENDMENT) ACT, 1922.

MILK AND DAIRIES ORDER, 1926.

Number of Preliminary Notices served during 1934	...	Nil
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(8) INSPECTION AND SUPERVISION OF FOOD.**(a) Milk Supply of District.**

Retail Purveyors of Milk on Register, 1934	...	...	121
Wholesale Traders or Producers, 1934	...	...	22
Purveyors of Certified, Grade (A) or Pasteurised			
Milk, 1934	..	...	11
Pasteuriser's Licence to sell Milk as "Pasteurised"			3
Samples for bacterial content and tubercle bacilli	...		41
Samples under Milk (Special Designations) Order	.		7

As pointed out in the report for 1934 there are indications that the pasteurisation of milk by several of the large retailers has become a routine measure, although the bulk of the milk is not sold as such under licence. It is generally recognised by the medical and public health professions that under existing circumstances pasteurised milk is the safest milk purchasable under ordinary prices.

The sale of milk in small general shops, except in bottles or sealed waxed paper cartons, is very much reduced.

41 samples of milk were examined bacteriologically, many of these samples being done in connection with the supply of milk to the schools under the scheme of the Milk Marketing Board. In each unsatisfactory count investigation was carried out at the dairy farm concerned, through the sanitary officer of the area, in several cases effective action being taken.

(b) Meat.

No alterations are reported as regards the number of slaughter-houses, of which some of the smaller on the outskirts of the town are rather unsatisfactory. The only possible remedy is the establishment of a public abattoir by the municipality or private enterprise.

Practically all animals killed are examined soon after slaughtering under the P.H. (Meat) Regulations of 1924, by a Sanitary Inspector.

The gradual improvement of the retailers' premises has been maintained, especially as regards the provision of refrigeration and the curtailment of window displays in the summer months.

TUBERCULOUS MEAT CONDEMNED DURING 1934.

<i>Whole Carcasses.</i>			
<i>Heifers.</i>	<i>Beasts.</i>	<i>Pigs.</i>	
1	1	1	
<i>Portions of Carcasses.</i>			
<i>Beef.</i>	<i>Pigs Heads.</i>	<i>Ox Heads.</i>	<i>Ox Heads and Tongues.</i>
108 stones.	32	13	3
<i>Ox Lungs.</i>	<i>Pigs Lungs.</i>	<i>Ox Livers.</i>	<i>Pigs Livers</i>
24 sets.	1 set.	7	2
<i>Pigs Crow.</i>	<i>Pigs Plucks</i>	<i>Beasts Lights</i>	<i>Pork.</i>
3	3	1	18 lbs.

MEAT (OTHER THAN TUBERCULOUS) CONDEMNED DURING 1934.

<i>Whole Carcasses.</i>			
<i>Pigs.</i>	<i>Sheep.</i>	<i>Heifers</i>	<i>Calves</i>
2	21	1	2
<i>Portions of Carcasses.</i>			
<i>Beef.</i>	<i>Mutton.</i>	<i>Pork</i>	<i>Suet.</i>
330 stones. 3½ lbs.	8 stones.	3½ stones.	11½ stones.
<i>Ox Livers.</i>	<i>Pigs Livers.</i>	<i>Sheeps Livers.</i>	<i>Lambs Livers.</i>
85 12 lbs.	11	8 56 lbs.	19½ stones.
<i>Pigs Heads.</i>	<i>Ox Head and Tongue.</i>	<i>Ox Lungs.</i>	<i>Pigs Lungs.</i>
2	1	3 sets.	6 sets.
<i>Ox Kidneys.</i>	<i>Lamb.</i>	<i>Pigs Hearts.</i>	<i>Lambs Sweetbreads.</i>
21 35 lbs.	38 lbs.	2	18 lbs.
<i>Pigs Plucks.</i>	<i>Bacon.</i>	<i>Brwon.</i>	<i>Chicken.</i>
6	3 cwt. 1 qr.	90 lbs.	1

SUNDRY FOODSTUFFS CONDEMNED DURING 1934.

<i>Cooked Shoulder.</i>	<i>Pine Cubes.</i>	<i>Butter.</i>	<i>Salmon.</i>
6 tins.	17 tins.	56 lbs.	15 tins.
<i>Beef.</i>	<i>Fruit Salad.</i>	<i>Tongues.</i>	<i>Ham.</i>
1 tins.	25 cases.	13 tins.	13 tins.

<i>Apricot.</i>	<i>Cooked Meat.</i>	<i>Veal.</i>	<i>Milk.</i>
4 tins.	1 tin.	3 tins.	31 tins.
<i>Crab.</i>	<i>Cherries.</i>	<i>Collar.</i>	
1 tin.	4 tins.	1 tin.	

(c) **Other Foods.**

During 1934, 2,293 visits were paid to premises engaged in the manufacture, preparation, storage and exposure of food for sale, especially during the summer months, in the kitchens and sculleries of restaurants and tea-shops, under Section 115, Hastings Corporation Act, 1924.

The standard of cleanliness and general hygiene in these premises is slowly but steadily improving. The recent Parade Improvements have created also an ambition on the part of certain restaurant proprietors and lessees to improve their premises.

Fish Condemned, 1934.

	Cases.	Boxes.	Stones.	lbs.	Kits.	Galls.	Barrels.	Bushels.	Bags.
Coalfish	$\frac{1}{2}$	1	7	...	...	...	...	...	...
Mackerel	...	3	90	...	...	...	...	...	...
Herrings	1	6	51½	...	5	...	...	...	...
Haddocks	...	31	...	...	...	...	...	...	...
Dabs	2	...	9	...	1	...	...	...	...
Whiting	1	...	12	...	...	...	...	...	...
Cod	...	6	11	...	...	...	...	...	...
Roes	...	6	$\frac{1}{2}$	...	...	...	...	...	...
Plaice	7½	2	66	...	...	...	...	...	...
Kippers	...	26	33½	...	...	...	...	...	...
Turbot	...	...	2	...	...	...	...	...	...
Codlings	...	11	2	...	...	...	...	...	...
Dog Fish	1	...	35	...	1	...	2	...	...
Skate Wings	1	1	4	...	...	...	...	...	...
Prawns	...	...	...	...	...	11	...	...	...
Dried Fillets	...	...	5	...	...	...	...	...	...
Mixed Fish	2	2	14½	...	...	...	...	...	...
Salmon	1	...	22	...	...	...	...	...	...
Witches	...	...	11½	...	...	...	...	...	...
Fillets	...	55½	$\frac{1}{2}$	...	...	...	...	...	...
Shrimps	...	...	...	...	...	83	...	...	2
Lemon Soles	1	1	31½	...	...	...	...	...	...
Dried Codlings	...	5	...	...	...	...	...	...	...
Whelks	...	...	...	...	...	11	...	1	...
Crabs	...	...	...	...	...	...	1	...	...
Coalfish Fillets	...	12	...	...	...	...	...	...	...

Total Weight of Fish Condemned, 1,059 stones.

(d) Food and Drugs (Adulteration) Act.

During the year 155 samples were taken and submitted to the Borough Analyst, at the School of Science, Hastings. The following are particulars of the samples, results of analysis and the action taken in certain cases.

MILK:—67 samples taken, 61 genuine, *i.e.*, above the legal standard; 6 adulterated, or below the legal standard, as follows:—

<i>Report of Analysis.</i>	<i>Action Taken.</i>	
(a) Fat 2.90%; Solids not fat 11.50%; 3.3% deficient in fat. A poor sample, probably genuine.	Informal sample. Followed up by a formal sample which was genuine.	
(b) Fat 2.73%; Solids not fat 8.65%; 9% deficient in fat.	Do.	Do.
(c) Fat 2.81%; Solids not fat 8.50%; 6.3% deficient in fat.	Do.	Do.
(d) Fat 2.91%; Solids not fat 8.63%; 3% deficient in fat.	Do.	Do.
(e) Fat 2.92%; Solids not fat 8.63%; 2.7% deficient in fat.	Do.	Do.
(f) Fat 3.20%; Solids not fat 8.40%; Added water nearly 5%.	Do.	Do.

Sardines:—3 samples (informal).

(a) 29 parts per million	} Reported to Dr. Hamill of the Ministry of Health.
(b) 7 " " "	
(c) 11 " " "	

Lemon Crystals:—1 sample (informal).

Tartaric instead of Citric Acid, 8% of acid	Referred to Town Clerk.
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The following 84 samples were all genuine:—Butter, 12; Margarine, 13; Cheese, 1; Rice, 3; Tapioca, 1; Coffee, 1; Baking Powder, 3; Demarara Sugar, 1; Meat and Fish Pastes, 3; Lard, 11; Sweets, 4; Pepper, 8; Jam, 3; Mustard, 3; Sardines, 4; Vinegar, 1; Oatmeal, 1; Marmalade, 1; Fluid Beef, 1; Chocolate Biscuit, 1; Crab, 1; Wheat Flakes, 1; Lemon Crystals, 1; Ginger, 2; Pearl Barley, 1; Health Salts, 1; Egg, 1.

(9) FACTORIES, WORKSHOPS AND WORKPLACES.
1—Inspection of Factories, Workshops and Workplaces.

Premises	Number of		
	Inspections	Written Notices	Prosecutions
Factories (Including Factory Laundries)	43	...	...
Workshops (Including Workshop Laundries)	99	7	...
Workplaces (Other than Out Workers' Premises included in Part 3 of this Report)	636	20	...
Total	778	27	...

2—Defects found in Factories, Workshops and Workplaces.

Particulars.	Number of Defects.			Number of Prosecutions.
	Found.	Remedied.	Referred to H.M. Inspector.	
<i>Nuisances under the Public Health Acts: *</i>				
Want of Cleanliness	43	43	...	...
Want of Ventilation	...	...	...	...
Overcrowding	...	...	...	...
Want of drainage of floors	2	2	...	...
Other Nuisances	15	15	...	...
Sanitary accommo- dation { insufficient	...	...	...	...
{ unsuitable or defective	5	5	...	...
{ not separate for sexes	...	...	...	...
<i>Offences under the Factory and Workshop Act:</i>				
Illegal occupation of underground bakehouse (S. 101)	...	...	...	...
Other offences (excluding offences relating to out-work and offences under the Sections mentioned in the Schedule to the Ministry of Health (Factories and Workshops Transfer of Powers) Order, 1921)	...	...	...	...
Total	65	65	...	...

* Including those specified in Sections 2, 3, 7, and 8, of the Factory and Workshops Act 1901 as remediable under the Public Health Acts.

3—Home Work.

29 lists were sent in, with 20 contractors and 31 workmen.

Class.		Number.
(4).—REGISTERED WORKSHOPS.		
Workshops on the register (S. 131) at the end of year.		376
(5).—OTHER MATTERS.		
Matters notified to H.M. Inspector of Factories:		
Failure to affix Abstract of the Factory and Workshop Act (S. 133, 1901)		Nil.
Action taken in matters referred by H.M. Inspector as remediable under the Public Health Acts, but not under the Factory and Workshop Acts (S. 5, 1901)	Notified by H.M. Inspector	2
	Reports (of action taken) sent to H.M. Inspector	2
		1
Other		
Underground Bakehouses (S. 101):		
Certificates granted during the year		Nil.
In use at the end of the year		21

(10) SHOPS ACTS. MERCHANDISE MARKS ACT.

The work under these Acts is carried out by the Sanitary Inspectors. Owing to additional legislation and orders in recent years, this work has greatly increased and the coming into force of the Shops Act 1934, at the beginning of 1935 has added considerably to the existing administration and inspection.

(11) Disinfestation of Houses, etc.

The matter of disinfestation, more particularly in the case of bug-infested houses, received special attention, both in connection with Council houses, which had become infested, and in houses infested in the older parts of the town. The Medical Officer of Health dealt with the whole matter of procedure and administration in a special report, more especially in connection with the treatment of bug-infested slum clearance houses at the time of the transfer of the tenants to new Council houses.

In addition to the usual methods of treatment, including sulphur gas, orthodichlor-benzene spray (as recommended by the Ministry), the painter's blow-lamp, steam disinfection of bedding, removal of skirting boards to facilitate tracking the bug to its resting place, the question of disinfecting the new tenants' furniture and other belongings, if infected, on the day of removal by means of hydrocyanic acid gas in specially sealed furniture vans was dealt with. It was pointed out that it would be necessary to contract out as regards this service with a London firm specialising in this work, which required special training and precautions in view of the dangerous nature of the gas. The matter is still under consideration pending the transfer of the new tenants.

Throughout the year a considerable number of houses have been disinfested for bugs and every help has been given to the Housing Department in connection with infested Council houses.

PREMISES DISINFESTED, JULY—DECEMBER, 1934.

Total number of premises or bedding disinfested						69
						—
One visit only	...	...	...	...	...	26
Two visits	...	...	...	...	...	20
Three visits	...	...	...	...	...	5
Four visits	...	...	...	...	...	3
Five visits	...	...	...	...	...	1
Six visits	...	...	...	...	...	1
Seven visits	...	...	...	...	...	2
Eight visits	...	...	...	...	...	3
						—
Council houses	...	...	...	...	...	26
For Bedding, etc., only	...	...	...	...	...	8
						—
Reasons for Disinfesting—						
Lice	...	...	...	...	...	4
Fleas	...	...	...	...	...	1
Bugs	...	...	...	...	...	64
						—

**(12) DISINFECTING & CLEANSING STATION, AMBULANCE
WORK. HOUSE, ETC., DISINFECTION:**

(a) Disinfecting Station—Summary of Articles Disinfected.

	Private Houses.	Public Insti- tutions, Hos- pitals, Homes	Upholsterers, Private Firms.	From other Sources.
Mattresses. ...	577	717	147	8
Blankets ...	1,206	1,777	94	1,330
Pillows ...	1,365	2,293	179	395
Other Articles and Clothing ... }	3,952	949	118	266
Total. ...	7,100	5,736	538	1,999

(b) Cleansing Station.

	Numbers bathed for			Sets of Clothing Disinfected.
	Scabies.	Vermin.	Other Causes.	
Adults ...	...	13	7	19
School Children ...	12	...	...	58
Children under School Age ...	...	...	...	...
Total... ..	12	13	7	77

(c) Premises Disinfected.

Dwelling Rooms.	Hospital Wards.	School Rooms.	Offices, Shops.	Cells.	Miscellaneous. Name if necessary.
735	33	7	...	3	1 Taxi-Cab. 1 Ambulance.

No complaints received as to injury to or loss of articles disinfected.

(d) Lethal Chamber.

FOR AGED, INFIRM AND DISEASED CATS AND DOGS.

Dogs destroyed	...	...	...	...	32
Cats destroyed	...	...	...	...	66

(e) Any other Work.

Dealing with condemned fish at the Fishmarket and assisting Inspector R.S.P.C.A.

(f) Ambulance and Disinfecting Van.

1. Number of journeys removal of patients...	297
2. Number of journeys removal of bedding...	3,093
3. Number of journeys disinfection of houses	823

Mileage—

(a) Ambulance 3,493

(b) Disinfecting Van 11,435

(13) REPORT ON COMMON LODGING HOUSES, 1934.

The two registered Common Lodging Houses in the Borough are kept under the close supervision of the Inspectors, who paid 20 visits.

Both houses were free from notifiable infectious disease during the year and are kept in accordance with the regulations.

(14) HOUSING.

During 1934, in addition to routine work, the Department was actively engaged in the preparation of local schemes, necessary in connection with the five years' national drive of the Ministry of Health for the clearance of slums, etc., under the Housing Act of 1930.

Altogether the Corporation has built since the war in several estates, scattered round the town, over 550 municipal houses, including 48 flats at Hardwicke Road, designed to rehouse in 1924, the dispossessed tenants from an Improvement Area in the Centre of the Bourne Valley, which, however, was not completely cleared.

While the contribution is undoubtedly most substantial and has relieved much housing hardship and a measure of overcrowding, certain housing problems have still to be met, including the question of slum clearance in unfit areas and improvement schemes under the Housing Act of 1930.

The Housing Act of 1935 (now in Bill form in Parliament) will deal among other things with overcrowding and its remedy, a problem, as will be seen, of some importance even in this town, though very much greater in the large industrial towns.

The first section of the five years' plan dealt with 17 clearance areas mainly in the Valley of the Bourne, including the incomplete Improvement Scheme 1924, and three small areas on the top and north-east side of All Saints' Street. An Improvement Scheme, embodying practically the western side of All Saints' Street, was included and approved by the Ministry under Section 7, Housing Act, 1930. Under this scheme, which will be put into operation as soon as the special model byelaws become operative, certain unfit houses will be demolished, other houses or buildings may be acquired to open out the area, and the remainder of the houses will be dealt with in accordance with the byelaws. A successful Improvement Scheme on these lines should do much to preserve the appearance and spirit of the street, and also to assure reasonably hygienic conditions for the tenants of the houses.

The Ministry of Health held in June an exhaustive enquiry into the first section, which included 203 houses, 23 buildings and approximately 700 persons. The Ministry's verdict, received late in the year, confirmed the representations for clearance as set out with a few exceptions. In one area No. 15, which will be utilised for rehousing, a certain number of properties, mainly business and stores, were retained within the area at market value.

As regards rehousing the scheme provides for 126 houses, 76 in the Bembrook Farm Estate, on the West Hill, Hastings, 32 in the Hollington Housing Estate, and 18 in the Red Lake Housing Estate. It was originally intended to utilise the land

in Area No. 15 and the Area to the North-east of All Saints' Street for rehousing purposes, but no doubt the plans in connection with these areas will be incorporated in a scheme under preparation, which deals with the future replanning of the whole of the Bourne Valley.

The second portion of the five years' programme is now under consideration and includes various areas in the Old Town, to the East of All Saints' Street, the West Hill Cottages and an area in West Street. In addition several areas have been put forward for consideration, more particularly in the Ore and Sandown districts. In certain areas bad arrangement, narrowness of streets and congestion of houses predominate, but in all areas the question of fitness, for example, sanitary defects, general disrepair, and a low hygienic standard, is a matter of importance.

Some mention should be made of another side of the housing question, reclamation and preservation of houses of a type, perhaps 50-60 years' old, somewhat below the accepted modern standard of comfort and hygiene and generally in need of ordinary repairs and decoration. In the proposed improvement scheme such houses will be brought reasonably up-to-date. Throughout the year a substantial amount of work is carried out by the officers of the Health Department in this direction as will be seen by the summary which follows. In some towns work of great value is being done by modernising properties of the description mentioned and including in the reconditioned house a ventilated food cupboard or larder and up-to-date W.C., a modern sink, sometimes even a bath, the general lighting and ventilation of the house being often improved. There is a considerable field in this town for work of this type either by enlightened owners, or by Public Utility Societies. Properties, reconditioned and properly supervised on the Octavia Hill system of house management, may get a new lease of life for many years, instead of slowly degenerating, as many of them do, into a state of chronic unfitness, which will eventually lead to the scrap heap.

Future municipal policy as regards housing will no doubt be affected materially by the provisions of the Housing Bill of 1935, shortly to become law, especially as regards the entirely new legislation dealing with overcrowding. A certain amount of information dealing with this matter on general lines is to be found in the Census figures of 1931. Overcrowding in Hastings, as in other health resorts, is less than in industrial cities, but still impressive enough, as the following figures prove :—

Population, Hastings Census 1931	...	...	65,207
No. of families living more than 2 per room	...		338
No. of persons	„	„	2,171
No. of families	„	1½	912
No. of persons	„	„	3,380
No. per 1,000 persons	„	„	123
No. of families in one roomed houses 946 containing 1,331 persons			
„	two	„	1,751
„	three	„	2,781
„	„	„	4,213
„	„	„	7,969

The standard of the Housing Bill if adopted gives the following minimum (apart from certain regulations as to floor space) :—

One room	...	...	...	2 persons
Two rooms	...	...	...	3 „
Three rooms	...	...	...	5 „
Four rooms	...	...	...	7 and child

and so on.

A problem as regards overcrowding, certainly much less than in many industrial towns, therefore does exist. A detailed and exhaustive enquiry will result on the passing of the Act, to be followed by an estimate as to the housing requirements in relation to overcrowding, based on formulæ and methods of calculation, which will no doubt be evolved by the Ministry of Health.

One final housing problem may be mentioned, again common to the many of the older residential towns, namely the considerable number of rather hastily converted post-war flats, generally including a basement. There is evidence that in many cases, owing to noise, inconvenience, and a low standard generally,

the tenants of such flats are seeking other accommodation either in modern flats, or small houses in one or other of the many new estates. As regards basements very few are really satisfactory, especially for a young family. Some can be and are being condemned as unfit. It is a question whether, in the presence of alternative accommodation, there may not be a distinct flight from the old-fashioned flat in the absence of a thorough reconditioning; in other words, economic pressure may compel the flat owner to move with the times.

HOUSING STATISTICS, 1934.

I. INSPECTION OF DWELLING HOUSES DURING THE YEAR :—

(1) (a) Total number of dwelling-houses inspected for housing defects under the Public Health or Housing Acts	861
(b) Number of inspections made for the purpose	1,151
(2) (a) Number of dwelling-houses (included under sub-head (1) above) which were inspected and recorded under the Housing Consolidated Regulations, 1925	274
(b) Number of inspections made for the purpose	536
(3) Number of dwelling-houses found to be in a state so dangerous or injurious to health as to be unfit for human habitation ..	15
(4) Number of dwelling-houses (exclusive of those referred to under the preceding sub-head) found not to be in all respects reasonably fit for human habitation	440

II. REMEDY OF DEFECTS DURING THE YEAR WITHOUT SERVICE OF FORMAL NOTICES :—

Number of defective dwelling-houses rendered fit in consequence of informal action by the Local Authority or their Officers... ..	426
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III. ACTION UNDER STATUTORY POWERS DURING THE YEAR :—

A. Proceedings under Sections 17, 18 and 23 of the Housing Act, 1930 :—

(1) Number of dwelling-houses in respect of which notices were served requiring repairs ...	Nil.
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(2) Number of dwelling-houses which were rendered fit after service of formal notices :—

(a) by owners Nil.

(b) by Local Authority in default of owners Nil.

B. Proceedings under Public Health Acts :—

(1) Number of dwelling-houses in respect of which notices were served requiring defects to be remedied Nil.

(2) Number of dwelling-houses in which defects were remedied after service of formal notices :—

(a) by owners Nil.

(b) by Local Authority in default of owners Nil.

C. Proceedings under Sections 19 and 21 of the Housing Act, 1930 :—

(1) Number of dwelling-houses in respect of which Demolition Orders were made 2

(2) Number of dwelling-houses demolished in pursuance of Demolition Orders 2

D. Proceedings under Section 20 of the Housing Act, 1930 :—

(1) Number of separate tenements or underground rooms in respect of which Closing Orders were made Nil.

(2) Number of separate tenements or underground rooms in respect of which Closing Orders were determined, the tenement or room having been rendered fit Nil.

LOCAL GOVERNMENT ACT, 1929.

HOSPITAL POLICY—MEDICAL ASPECTS.

(a) **The Municipal Hospital, Frederick Road.**

As a result of a carefully considered policy the following important improvements have been carried out at the Municipal Hospital during the past 4 years.

- (1) An additional block of 41 beds for female cases.
- (2) A separate children's annexe for 35 beds.
- (3) Provision of central heating.
- (4) Open-air annexe for male tuberculosis cases.
- (5) A new mortuary.

In addition, the general equipment of the hospital has been materially improved.

In pursuance of the policy of bringing the whole Institution up to a high standard of efficiency, various other matters have been or are being dealt with.

(1) A start was made with the new Casual Ward on the House side, and this will be completed in 1935.

(2) Consideration has been given to the matter of providing a new *ad hoc* Nurses' Home, a very vital necessity on the Hospital side.

(3) Consideration has also been given, on a report by the Medical Officer of Health, to the matter of providing separate accommodation for mental cases, including beds for cases of mental disorder under observation. The old casual block has been examined as likely to provide a possible site and framework.

(4) The provision of a new Nurses' Home will set aside important accommodation on the House side and will enable very necessary improvements to be carried out as regards classification and additional bed space per patient.

No definite action has been taken as regards declaration and appropriation under the Public Health Acts, but the further alterations and additions mentioned will make this a much more practicable matter.

(b) Hospital Accommodation.

The accommodation available for Hastings and District, in the voluntary hospitals, the Royal East Sussex, the Buchanan, and Bexhill, together with the Municipal Hospital, is about 550 beds, which appears adequate.

The Royal East Sussex Hospital opened a new Nurses' Home in 1935; the Buchanan Hospital is now promoting a similar project.

(c) Transfer of Medical Work.

With regard to the transfer of medical work under the 1929 Act :—

(a) The Medical Officer of Health is medical adviser to the Public Assistance Committee and in medical charge of the Cottage Homes for children.

(b) Medical relief is administered by a Special Sub-Committee of the Public Assistance Committee, there being 4 districts, with 4 district medical officers.

(c) Vaccination and Infant Protection are administered in the department of the Medical Officer of Health under the Public Health and Maternity and Child Welfare Committees respectively, the Health Visitors acting as Infant Protection Visitors.

STATISTICS, MUNICIPAL HOSPITAL, 1934.

1. Classification of Beds :—

		Male.	Female.	Total.
Medical and Surgical ...		56	117	173
Tuberculosis		6	13	19
Maternity		—	11	11
Mental		14	22	36
Total		76	163	239
Children				53
		Grand Total	...	292

2.	Total Admissions	...	...	...	1,226
3.	Confinements	...	...	...	67
4.	Average beds occupied	...	...	...	246
	Highest	...	...	...	280
	Lowest	...	...	...	216
5.	No. of operations	...	...	...	179
	,, abdominal operations	...	...	...	44
6.	No. of cases Out-Patients	...	...	...	100
	,, visits	...	...	...	480

METEOROLOGY.

I am greatly indebted to Mr. Simmons, the Meteorologist for the Borough, for the following information relating to weather conditions in Hastings in 1934.

1. Table showing monthly hours of Bright Sunshine, &c.

Month.	Hours of bright Sunshine.	Rainfall in millimetres.	Ultra Violet Radiation (Monthly average reading).
January ...	62·0	81·6	·5
February ...	98·0	7·7	·94
March ...	137·1	67·7	1·6
April ...	158·9	60·1	1·4
May ...	258·0	14·5	2·8
June ...	241·6	48·5	4·0
July ...	298·0	29·3	3·5
August ...	226·9	51·3	2·3
September ...	206·9	26·4	2·0
October ...	79·0	65·8	1·0
November ...	38·0	93·6	·4
December ...	28·0	197·2	·2
Total ...	1,832·4 hrs.	743·7 or 29·26 ins.	20·64
Average ...	daily 5·02 hrs.	monthly 2·44 ins.	monthly 1·72

2. Total hours of Sunshine, Comparative figures.

Eastbourne	...	...	...	1832.6 hrs.
Hastings	...	...	...	1832.4 „
Brighton	...	...	...	1782.8 „
Tunbridge Wells	...	...	...	1702.9 „
Margate	...	...	...	1823.9 „
Dover	...	...	...	1796.2 „
Bournemouth	...	...	...	1823.2 „

3. Miscellaneous.

Rainfall was 22 above the normal yearly fall.

Snow fell on 3 occasions, hail on 2.

There were 6 thunderstorms.

Fog observed on 6 occasions.

Ground Frost occurred on 35 occasions.

Wind at Gale force, 7 occasions.

The warmest day was July 18th, Temperature 81° F.

The warmest night was July 18th, Temperature 67° F.

The coldest day was February 2nd, Temperature 37° F.

The coldest nights were February 2nd and 3rd, and November 1st, Temperature 28° F.

Relative Humidity, Morning 81%.

Relative Humidity, Night 84%.

Earth temperature mean 1 ft. 52.7° F.

Earth temperature mean 4 ft. 52.1° F.

Prevailing wind, S.W.

Mean daily temperature :—

Max. 56.9° ; Normal 55.4° ; Absolute max. 81°.

Min. 45.8° ; Normal 44.5° ; Absolute min. 28°.

Summary of Provision of Health Services for the Area.

(a) Laboratory facilities.

(See Special Section).

(b) Ambulance facilities.

The service both for infectious and non-infectious cases is adequate for the district.

(See Report for 1930.)

(c) **Nursing in the Home.**

See Special Section—Maternity and Child Welfare.
(See also Report for 1930).

(d) **Clinic and Treatment Centres.**

(See Special Sections).
(See Report for 1930).

(e) **Hospitals—Public and Voluntary.**

(See Special Section).

(f) **Medical Services transferred from Late Board of Guardians.**

(See Special Section).

(g) **Mental Deficiency.**

(See Special Section).

(h) **Maternity and Child Welfare Services.**

(See Special Section).

(i) **Institutional Provision for Unmarried Mothers, Illegitimate Infants and Homeless Children.**

(See Report for 1930).

(j) **Prevention of Blindness.**

The Corporation gives a substantial grant to the Voluntary Society for the Blind, which is carrying out an ever increasing most admirable and beneficent work, *e.g.*, maintenance of subsistence allowance up to 22/6 per week for each blind person, obtaining and keeping suitable work, general and special treatment in local hospitals and national institutions.

By a declaration under the Local Government Act of 1929, the Voluntary Committee now deals with blind persons and sighted “dependents” requiring out-relief from the Public Assistance Committee.

The Public Health Committee also authorised the Honorary Medical Officer, Dr. Lowe, to complete the Special Medical Certificate of the Board of Education and the Ministry of Health in respect of all new cases.

(k) **Rag, Flock Acts, 1911, 1922.**

The amount of flock used is comparatively small in amount, clean and employed in re-making mattresses and general upholstery. The premises are all in a satisfactory condition and under the regular supervision of the Sanitary Inspectors.

